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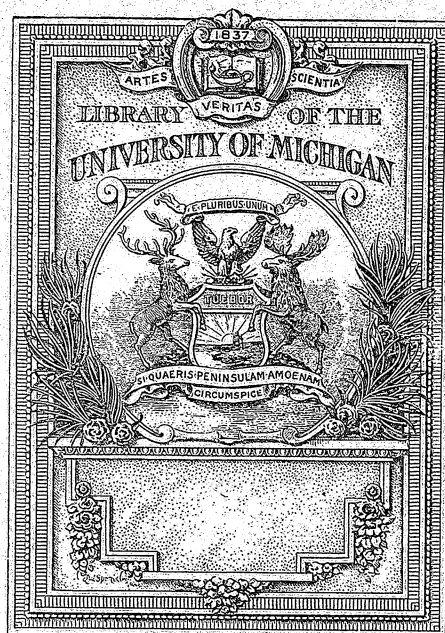
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THE
HOMŒOPATHIC EXAMINER,

BY
A. GERALD HULL, M. D.

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THE HOMŒOPATHIC EXAMINER.

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VOL. 3.

POPULAR CONSIDERATIONS ON HOMŒOPATHIA,

BY

WILLIAM CULLEN BRYANT, ESQ.,

*President of the New York Homœo-
pathic Society.*

AN ANNUAL ORATION.

GENTLEMEN OF THE
HOMŒOPATHIC SOCIETY :

In acknowledging the honor which has been done me by electing me one of your officers, I should, perhaps, apologize, not being of the faculty of medicine, for accepting a place which many may understand to imply a willingness to decide presumptuously upon questions, concerning which, none but those who have studied them profoundly, are competent to judge.

It should be considered, however, that the community at large must necessarily determine for themselves what physicians they will employ ; whether they will call to their families the disciple of Brown, or the pupil of Broussais, or the eclectic who holds with neither ; whether they will ask the attendance of one who saturates his patients with powerful drugs, or one who administers them sparingly and cautiously, him who follows the old methods of practice or him who adopts the new. These are questions which every man must answer

for himself according to the best lights he possesses. He finds the faculty disagreed among themselves, divided into different parties ; able, learned, and experienced men contending for different methods of cure, and he must choose one or the other of them, or dispense with the assistance of physicians altogether, a responsibility which, even the most sceptical in regard to the value of medical science are scarce ever willing to take in any case which wears the appearance of danger. In making this choice no man is guilty of an affectation of medical science. The community, at large, however ignorant of medicine, must necessarily be the arbiters between the different schools. Other umpires there are none. It is their own health and safety which are concerned, and they have a right to decide with whom these shall be entrusted ; and with the results of the different modes of medical practice before them, the means of forming a just and impartial judgment are in their power.

The members of the Homœopathic Society merely exercise the right of making this decision for themselves. Our association is formed, not for the sake of making doctors of the members, but for the sake of extending the knowledge of what they deem an important discovery, the merits of which they infer from what they have seen of its results. They wish to secure to it a fair and intelligent examination on the part of the public ; they perceive that its principles and methods are little understood, and are made the subject of fre-

quent ridicule, and they are sensible that nothing so effectually hinders impartial examination as derision. Appeal to the pride of him whom you wish to dissuade from inquiry, tell him that the notions you oppose are so silly that it is wholly unworthy of a man of sense like him, who must perceive their absurdity at a glance, to waste his time in looking at the evidence by which they are supported, and if he be a weak-minded or foolishly-sensitive person, you will probably have gained your point. You will have engaged on your side his self-love, his wish to stand well with others, his fear of being laughed at, and with these strong and powerful auxiliaries you need not apprehend much from his mere love of investigation.

To justify what we have done and what we propose to do, it may, perhaps, be well to occupy a few moments in making a comparison of the prevalent method of medical practice, with that which is recently introduced, under the name of the Homœopathic method. In doing this it is my design to take into view only those general considerations by which we, who are not of the medical faculty, must necessarily be governed in choosing between the different medical sects. Technical, and strictly scientific investigations must be left to the profession.

Let us inquire then, in the first place, what are the just pretensions of the prevalent or Allopathic practice to certainty and safety ; what title it has, on the whole, taking together all the cases in which it is followed, and all the physicians who follow it, to be regarded as a method in which we should confide and with which we ought to be content, of prolonging life, counteracting disease, and alleviating or preventing pain. We cannot do better, in this inquiry, than to take the declarations of men who have devoted the labor of their lives to this practice, and who if any could, should be able to pronounce its eulogy.

Boerhaave, an illustrious name in medicine, uses the following remarkable language.

“ If we compare the good which half a dozen true disciples of *Æsculapius* have done since their art began, with the evil which the immense number of doctors have inflicted upon mankind, we must be satisfied that it would have been infinitely better for mankind if medical men had never existed.”

But Boerhaave it may be said lived a hundred years ago, and was himself a reformer in medicine ; since his time the methods of the art have become more rational and more safe. Hear, then, Dr. Pereira, himself a vehement adversary of the Homœopathic practice. In his *Lectures on Pharmacology* published in 1835, in the *London Medical Gazette*, he says, speaking of the common practice :

“ We can hardly refuse our assent to the observation of the late Sir Gilbert Blane, that in many cases patients get well in spite of the means employed ; and sometimes when the practitioner fancies that he has made a great cure, we may fairly assume the patient to have had a happy escape.”

Here is a confession of great uncertainty and great danger in the ordinary practice of medicine at the present day. If so many patients recover in spite of improper treatment, how many must perish by improper treatment ; if what is supposed to be a cure by medicine is sometimes only an escape from its effects, it is equally probable that the deaths which are supposed to be caused by disease, are sometimes caused by the prescriptions of the practitioner. But let us look a little more closely into the nature of this uncertainty and danger, and in doing this I propose to take as our guide an able writer of the present school of medicine.

Dr. Abercrombie of Edinburgh, an eminent physician, in his book entitled “ *Inquiries concerning the Intellectual powers and the investigation of Truth*,” remarks that the uncertainty, and of course the danger of medical practice is principally felt in two respects, first in regard to the characters of disease, and sec-

only in regard to the remedies employed. Of the first he says :

"Since medicine was first cultivated as a science, a leading object of attention has been to ascertain the characters or symptoms by which internal diseases are indicated, and by which they are distinguished from other diseases that resemble them. But with the accumulated experience of ages bearing upon this important subject, our extended observation has only served to convince us how deficient we are in this department, and how often, even in the first step in our progress, we are left to conjecture. A writer of high eminence has even hazarded the assertion that those persons are most confident in regard to the characters of disease whose knowledge is most limited and that more extended observation generally leads to doubt."

As to the effect of medicines upon the patient Dr. Abercrombie remarks :

"An equal or even more remarkable uncertainty attends all our researches on the second head to which I have referred, namely, the action of external agents upon the body. These engage our attention in two respects, as causes of disease, and as remedies ; and in both these views the action of them is fraught with the highest degree of uncertainty."

Observe the terms chosen by this sensible and cautious Scotchman,—“the highest degree of uncertainty.” Let me here remark that where so much uncertainty exists in regard to the effects of medicines, there must be frequent mischief done by the practitioner. Prescribing, as he must do, according to his best conjectures, he must sometimes prescribe hurtfully, and in such a manner as to occasion the death of his patient. He who shoots in the dark is not only likely to miss his aim but is in danger of maiming or killing those whom he would gladly spare.

Again, after showing what exactness has been attained in other branches of science; with

what confidence, for example, in chemistry, certain results are expected from certain preparations, and how this confidence is never disappointed, Dr. Abercrombie proceeds to say :

"With what different feelings we contemplate a case of dangerous internal disease,—its probable progress and termination, and the effects which our remedies are likely to produce in arresting it—those best can tell who have most experienced them."

I shall make but one more quotation from this writer and it is remarkable for the force of its language. He is speaking of the difficulty of making use of previous medical experience.

"When in the practice of medicine," says this acute writer, "we apply to new cases the knowledge acquired from other cases which we believe to be of the same nature, the difficulties are so great, that it is doubtful whether in any case we can properly be said to act upon experience, as we do in other branches of science. * * * The difficulties and sources of uncertainty which meet us at every stage of such investigations, are in fact so great and numerous, that those who have had the most extensive opportunities of observation will be the first to acknowledge that our pretended experience must in general sink into analogy, and even our analogy too often into conjecture."

How much truth there is in these remarks, all who have observed with moderate attention the course and results of medical practice can testify. We all know with what confidence the young practitioner begins his career, sure of curing diseases by the methods laid down in his books ; we see him meeting with disappointment after disappointment, and after many failures we find that he has unlearned that confidence, and in its stead has been taught the melancholy lesson of doubt, the wisdom of cautious and wary conjecture,

the surest wisdom of the prevalent school of medicine and the parent of its safest practice. We see how often those very prescriptions which are meant for remedies, and which are applied with the best lights of the practitioner, are followed by an immediate increase of the malignity of the disease, and probably accelerate death. We know how greatly physicians differ in their ideas of the proper treatment of particular cases, differences which have often been ascribed to their quarrelsome temper, but which in reality spring from a different exercise of the faculty of conjecture. There is no reason why physicians should be more contentious, more fond of contradiction, more ill-tempered than other men; but there is abundant reason why they should disagree in regard to the treatment of cases which come under their observation, a reason founded in the extreme uncertainty of their art. Two men of different degrees of sagacity, of different degrees of caution, of different experience, different reading, a leaning to different theories, cannot be expected to agree in their conjectures, and where there is so vast a field for error both may be wrong. "I am weary," said an eminent physician, quoted by D'Alembert, and the saying is repeated with an appearance of approbation by Dr. Abercrombie, "I am weary of guessing"—and he abandoned the practice.

There is another source of danger which it did not come within the scope of Dr. Abercrombie's rule to notice, the danger of substituting one disease for another; of breaking down the constitution, while the cure is going on; driving out the original malady, and leaving in its stead another, the product of medicine. The greater number of medical remedies are, properly speaking, poisons, the frequent administration of which, cannot but be attended with injury to the constitution. Frequent bleedings, it is admitted by most medical men, I believe, cannot be borne without mischief, wasting, as

they do, the resources of the constitution, pouring out upon the ground the provision made by nature for the nourishment and strength of the frame, and exhausting her by compelling her to do her work over again. I need not direct your attention to the numerous instances in which persons, cured as they are said to be of diseases, never recover their former health and strength; who come from a sick-bed smitten by a premature old age, and drag out a remainder of life embittered by chronic sufferings which no skill of the physician can relieve.

Are we then reduced to this, that the medical experience of so many centuries ends only in methods of cure founded on conjecture and full of doubt and danger, which they who administer most wisely, administer in anxiety and in dread of a fatal event? Is it for this only that the lancet has spilled oceans of blood; is it for this that the womb of earth has been pierced for her most potent minerals, her bosom searched under all climates for virtuous herbs, and both mineral and herb vexed by fire and fierce chemical agents to wring from them their essences and hidden powers; is it for this that so many lives have been sacrificed in the experiment to restore health, and that humane and sagacious men have passed days and nights by the bedside of the sick, patiently watching the symptoms of disease as they vary, and waiting for the crisis which brings the omen of returning health or that of dissolution? Is it for this only that the history of disease has been chronicled in so many thousand volumes; that learned men have marshalled the host of maladies into classes and species in order to attack them to greater advantage; that so many systems of cure one after another have been proposed, discussed, subjected to the test of experiment, and exploded? Do we gather nothing from all these researches, reasonings, toils and sufferings, but the assurance, that although the drugs

we take from our physicians may cure, it is also possible that they may kill ; and that if we recover, although this may be the consequence of a shrewd conjecture, yet it may also deserve to be called a fortunate escape ? Is this all—is this the sum of the benefits which our race is to derive from the science of medicine ?

Let me not be misunderstood. I do not mean to defame or decry the medical profession. There are men in it of great sagacity, and strong humanity, who wrestle vigorously with the melancholy uncertainty of their art, masters of all its curious and interesting learning, instructed in all the succors which the practice of their school is able to offer, and when driven to conjecture, choosing the remedies they administer with a wise and anxious calculation of probabilities. I have known many such men, the ornaments of their profession and our race. I look upon the profession of medicine generally, as one of the great manifestations of human intellect, which owe their origin to the wants of man in a social state, springing, as it does, by a sort of necessity from his dread of pain, the value he places upon health, his love of life. To them all the improvements which the healing art has received are due ; to them all which it may yet receive will be owing ; and I look forward to the time when it will be no longer environed with the doubt and obscurity which so many of them now deplore. Meantime, if that art has not hitherto been more perfect, more certain, more deserving of the name of a science—an appellation which implies fixed and settled principles—the fault is not theirs. Their art is what the past has made it. If it be not all that might be wished, it is not for want of patient research and vigorous exertion of intellect ; it is not for want of men who give to it the disinterested labor of their lives ; who explore diligently every collateral science and branch of knowledge, that may throw light upon it ; who become inmates of

hospitals, and lazarettos to study the nature and remedies of disease ; men who for the sake of their art penetrate into the most noisome abodes of sickness, and expose themselves to the infection of deadly climates and of cities smitten with the pestilence.

But ought they or ought we to be satisfied with methods which, by the confession of the faculty who employ them, are so imperfect, so liable to mistake, and attended with so much danger ? After so many centuries of experiment, ought not the utter hopelessness of perfecting these methods into any thing like certainty, to lead them and us to suspect that they are in the wrong path ? Should not the evident healing effects of certain remedies, which are employed as specifics in a few cases, put us upon enquiring whether there does not exist, if we could but discover its principle and proper application, a better, safer and simpler method, a more comprehensive system of specifics, if I may so call it, by which all the substances that act so potently upon the human frame might be employed with tolerable safety and certainty in counteracting disease ?

That method we believe has been discovered. Fifty years ago a learned and accomplished German physician, then in the vigor of manhood and still living, while engaged in translating the *Materia Medica* of Cullen into his native language,—for the Germans translate every thing—was struck with the contradictory effects ascribed in that work to Peruvian Bark. To ascertain its true virtues, he made, although in perfect health, the experiment on his own person. The very first dose caused him to shiver and glow with those alternate chills and heats which the Germans in their expressive language call *feberfrost*, their name for intermittent fever. He was led by this remarkable circumstance to ask himself, whether the true law of medical cures did not consist in this—that the same drug which will produce a certain form of suffering in a healthy

person, will cure a similar malady in the sick. He renewed the experiment; he repeated it with other medicines, observing a strict regimen, and submitting to much suffering; he engaged his friends to assist him in these inquiries and to become the subjects of similar experiments; until at length what was conjecture had become conviction, and he had fully established, as he believed, the truth of the maxim, that like cures like, or that medicines relieve, in the sick, symptoms resembling those which they cause in the well. He found, however, that it required a much smaller quantity of medicine, to relieve illness than to disturb health, and that minute doses were the most safe and certain in their operation. This physician was Hahnemann, and the method of cure thus discovered received from him the name of the *Homœopathic method*.

Pursuing his researches and taking for his guide, the principle that medicines will be effectual in restoring health, only in proportion as they have power to excite the system, or in other words to disturb health, Hahnemann endeavored to ascertain by experiments upon the healthy subject, the precise effects of all those substances which form the mass of medical remedies. By taking them himself and administering them to others, under a regimen which did not allow their impression to be counteracted or interrupted, he succeeded, after the researches of many years, in procuring a collection of observations, establishing the operation of remedies with a fullness, minuteness and certainty, infinitely greater than had ever before been attained by the united labors of all who had experimented or written upon the subject. In recording them, the minutest and most apparently trifling change from the usual and healthy state was not neglected; the slightest affection of the most unimportant organ, the most inconsiderable sensation which could be fairly traced to the medicine, the very moods of the mind and state of the feel-

ings, all were written down. This immense mass of observations, gathered with an enduring patience of which scarcely any but a German could be capable, was published at Dresden, in the year 1811, in six octavo volumes, with the title of "*The pure Materia Medica*." In the course of his investigations, Hahnemann made the important discovery, that there is a large class of medicaments which serve to counteract and mitigate the effects of others, that almost every remedy is in fact provided with an effectual antidote, and with this discovery he enriched his work.

Such was the result of Hahnemann's inquiries into the operation of remedies. Another labor remained, that of determining their application. In this he proceeded with the same patience, caution, and minuteness of observation. He soon found himself obliged to discard the entire arrangement and nomenclature of diseases which had been established with so much pains by the prevalent school. He perceived that it is the business of the physician, not to generalize, but to individualize; that the precise malady of the individual patient, and not any general malady, is the one to be relieved, and that he can only do this by studying it in all its symptoms and manifestations; as particularly and carefully in those which distinguish it from other cases as those in which it resembles them. He saw that to group, under general heads, cases which agree in certain striking symptoms, treat them after a general manner and yet expect cures, is as absurd as it would be in a portrait painter to divide his sitters into fat and lean, long-faced and round-faced, fair and brown, and painting on these general principles, without attending to the peculiarities which distinguish one individual from all the rest of his species, expect the world to wonder at the accuracy of his likenesses.

Hahnemann, therefore, examined his patients with the most anxious minuteness. He in-

quired not merely into those marks of irritation and suffering to which physicians of the prevalent school pay attention, but investigated the condition of all their organs and functions of the individual from head to foot, every thing peculiar, every sensation in the slightest degree unusual with the patient, whether painful or otherwise, the hours of the day when they were felt, the circumstances which heightened or allayed them, the posture of the body with which they were accompanied, the expression of the countenance, the peculiar temperament of the individual, the state of the feelings and of the intellect both before and during the illness, his previous habits and previous diseases, with a multitude of other particulars, of all which he made a careful record in writing, presenting as far as was possible a complete portraiture of the particular case, in which all that distinguished it from others was noted with the same fidelity as the portrait painter preserves, in his likenesses, the individual markings, proportions, and expression which distinguish the original of his work from all other men.

With this memorandum before him, it became the business of Hahnemann to choose a remedy. To counteract the disease indicated by all the appearances and sensations he had observed, he selected that medicine which was capable of producing in a healthy person a disturbance of the functions manifested by all the same symptoms. His success astonished all who observed the experiment; diseases yielded as if expelled from the system by some gentle but irresistible and immediate effort of nature, and the method of which I have given this brief outline, became the model of practice, with all who have adopted the maxim that like cures like. In the meantime Hahnemann found it necessary, in order to overcome disease without a previous sensible aggravation of its violence, to diminish from time to time the size of the doses administered; he

perceived also, that medicines seemed to acquire a surer efficacy from being attenuated by trituration or dilution, and he finally adopted the practice of administering some harmless substance slightly impregnated with the remedy.

Compare now the clearness and certainty of this system with the obscurity and uncertainty of the common methods. Take first the characters of disease, in regard to which the cautious and intelligent Dr. Abercrombie acknowledges that the practitioner of the Allopathic school is perplexed at every step with painful doubts and is obliged to grope and guess his way in darkness. We find little of that uncertainty here. All that can be known of the nature of the disease, all that is necessary to the application of the remedy, is ascertained by the Homœopathic physician. He interrogates nature, as she is interrogated by the chemist, through the appearances which she presents to the senses, and interrogating her closely, without suffering his imagination to wander in search of proximate causes, he receives from her answers which serve his purpose in directing him to the proper remedies.

Consider next the operation of the remedies. The extreme uncertainty, of which Dr. Abercrombie complains as existing in the Allopathic school of medicine, finds no place here. The effect of these remedies has been already determined under the most favorable circumstances for coming at the truth. They have been tried upon the healthy individual; their effects cannot therefore have been confounded, as they often must be in the common methods, with the sufferings caused by disease, or with the reaction of nature. They have been tried in a pure and uncompounded form, the influence of all other medical agents being cautiously withdrawn, and therefore the effect of one remedy cannot have been mistaken for the effect of another. The knowledge which

the Homœopathic physician has of the action of his medicines, is thus, notwithstanding that the system is yet in the imperfection of its infancy, remarkable for its precision and fulness. In applying it to a case of disease the symptoms of which have been carefully noted, nothing is necessary but a patient comparison and a sound judgment. The medication which includes all these symptoms in its operation upon the healthy individual, is the precise and proper remedy.

A third source of uncertainty in the common practice of medicine, acknowledged and lamented by the author we have quoted, is the insufficiency of experience as a guide. In the new practice, however, if there be any soundness in the principles on which it is founded, experience is a most sure and safe guide, worthy of being followed with implicit confidence. The great merit of the system consists in the sure application of all the observations which have once been accurately made. It proceeds upon the principle, that in cases which present precisely the same symptoms, the remedy must be the same, and the effect will be alike and invariable.

The last source of uncertainty which I mentioned in the outset as attending the common practice, is the danger, particularly if the practitioner be not very skillful or very watchful, of substituting an artificial disease caused by medicine, for the original malady. This the champions of the common practice will admit cannot happen in consequence of the administration of Homœopathic remedies. They are ready to dismiss any allusion to this point with a laugh. "Your imperceptible particles of medicine," say they, "your bits of starch and sugar, can produce no effect either good or bad." The friends of the new practice on the other hand maintain that these minute doses, although powerful to remove the disease when they coincide with it, may yet be given without danger when they do not.

There is no necessity, therefore, of dwelling any longer on this point.

Let us recapitulate a little. We have shown that an examination of the patient, according to the plan laid down by the founder of the new practice, informs the practitioner in the greater number of cases of all that he has occasion to know. It points him to the proper remedy by sure and positive indications. The effect of the remedy he finds already determined by careful experiments, tried under the most advantageous circumstances. The experience of cases which have been observed is a safe guide in the treatment of new cases as they arise; it is not simple conjecture, it is not plausible analogy, it is the certain and steady light of experience. These are great advantages in any system, but you have already heard it acknowledged that they belong not to the prevalent methods.

But it will be said—in fact it has been said in answer to all this, or in answer to similar views of the subject, that the new system, to be sure, is neatly enough put together, and wants but one thing to make it perfect, some foundation in reality. "You have taken care," say its adversaries, "to adjust its several parts with an ingenious dependence upon each other; your *Materia Medica*, your examination of the sick, your choice of a remedy, your use of experience, are all nicely dove-tailed together; you would be bad system makers if you did not provide for that; the objection to your method is that your remedies do not produce the effects you attribute to them; your doses are so minute that they are inert; your cures are the mere effect of nature left to herself; and many of those cases in which your remedies do no good, would have been cured if the usual method of practice had been followed."

To this we answer by simply inviting the test of experiment. We say to those who deny the efficacy of the Homœopathic remedies—try them; try them in those cases in

which delay can occasion no danger, or those in which the old methods have been applied in vain; try then yourself, being first certain that you choose the precise remedy indicated by the system, and that those conditions which prevent their operation from being counteracted or disturbed be strictly observed; do this, or see them applied under the direction of some expert Homœopathic practitioner. If after you have witnessed a sufficient number of experiments, you see no cause to believe in their efficacy, or if you find them less effectual and less safe than remedies administered in the usual manner, you may then decry them with a clear conscience.

This challenge has often been given, and it is generally met by affirming that the Homœopathic system is inconsistent with all our experience, and is therefore unworthy of a serious investigation by actual experiment. They who talk thus, for although they are not willing to make experiments, they are ready to debate, then proceed to argue against the doctrines of Hahnemann, reasoning, often with much plausibility I admit, from their experience under the old methods to what they infer must be our experience under the new.

If there were no other way of reaching the truth, if we could not get at the means of making a fair trial of the method which is scoffed at as so absurd, this would, I grant, be a fair cause of argument. We must, necessarily, in that case, reason from the known to the unknown. But when we may at pleasure cause the unknown to become known, by an easy process of experiment, we deal unfairly with the truth if we refuse the test. We have no right to shut our eyes to what is, while we persist in talking about what we imagine must be.

I admit that the Homœopathic method strikes one who is familiar only with the old practice, as very strange, not to say absurd and puerile. I know this, for I myself have sat in the seat

of the scorers. But when we look a little more closely into the question, we shall see that there is no inconsistency between that method and what we already know of diseases and their cure. With regard to the maxim that like cures like, it is acted upon by every person who holds a scorched finger to the fire to relieve the pain. It is known to all who rub a frost-bitten limb with snow to restore its functions without pain and danger. It is familiar to the physician who sees that the abuse of mercury produces diseases similar to those for which it is a specific, and that the abuse of sulphur causes cutaneous eruptions like those which it is employed to cure. It is known to all who anticipate the small-pox by vaccination.

All who have felt the hands glow after putting them for a moment into snow, all who have experienced a general warmth of the frame after a shower-bath or a plunge in cold water, are witnesses of the truth of the Homœopathic principle. The natural effect of cold applications, we should say at once, is to diminish warmth, and this is invariably true of an inanimate or inorganic substance. Immerse a stone or a piece of wood, though but for an instant, in water colder than itself, and you render it colder. Do the same thing with the living body, let the cold be suddenly applied and withdrawn, and you find that a contrary effect is produced. A peculiar impulse has been given to the powers of the animal system, and the brief sensation of cold is more than compensated by the production of a genial and enduring warmth.

These examples, which might be multiplied, show that the root of the Homœopathic system exists in the familiar experience not only of physicians, but of all mankind in all ages. Hahnemann has merely taken a well known truth and shown its vast comprehensiveness and detected its numberless applications.

To those who hesitate at the idea of effecting the cure of maladies by highly attenuated and diluted medicines, it may be suggested that there are analogies in nature which make it by no means unreasonable. Who can measure, or weigh, or detect by chemical analysis, or by any exquisite exercise of the senses, the particles composing the infection of the small-pox, which exhaling perhaps from a single patient, and diffused through a vast extent of atmosphere, carry pestilence wherever they alight? The vaccine virus also, to which I have already alluded as a Homœopathic remedy, if applied by a scratch in the living muscle, even though the quantity be too minute to be discerned by a microscope, is yet—so I am told by practitioners—capable of forming a complete pustule, and securing the constitution from the contagion of the small-pox for life.

We hear of persons dangerously ill of pulmonary complaints, cured by removing from the Atlantic States to the Valley of the Mississippi; changing not the latitude nor the temperature, but the atmosphere. Yet who can tell in what the difference of the atmosphere consists? No delicate test of philosophy can detect the healing element which restores the lungs to their soundness. What attenuation of Hahnemann is finer and more subtle than the odours of certain flowers which strike many persons with nausea and giddiness? I was informed not long since of a person living in the eastern part of Massachusetts, who is subject to an annual and severe erysipelas, which attacks him in the month of September. He has accidentally discovered that by removing to a considerable distance, by passing, for example, the month of September in the western part of New York, he escapes the attack altogether. The cause of the distemper is supposed to be a certain plant, the exhalations of which, though in a state of extreme dispersion, have yet the

power to occasion disease in a system peculiarly susceptible. Whether their conjecture be true or not, this at least is certain, that the cause is one which is so slight as to affect no one else, and only affects him on account of a preternatural susceptibility.

I might give other familiar examples of the effect of highly attenuated substances. There are persons so constituted as to feel a strong uneasiness if a cat be in the room, although they have no other knowledge of the presence of the animal than what is derived from the sensation. There are others whom certain kinds of food, cheese for example, though not in sight, and not perceptible to the senses of any one else, affect with nausea and disgust.

These are instances of a peculiar sensitiveness to the effects of extremely slight causes; causes so slight, so diffused, so lost, I might almost say, in the boundlessness of the atmosphere, that they have no effect whatever upon the great mass of mankind. Call it a morbid sensitiveness, if you will; it is morbid, it is not precisely a healthy condition, and this brings me to the very point I would establish. Our frames are so constituted that while that due balance of the functions which we call health is kept up, slight causes generally make no impression, but when that balance is lost, they often produce the most marked effects. What for example is more grateful to the human eye than light, more suited to its organization, more harmless? Yet in some diseased states of the eye, it must be kept in utter darkness, and the slenderest pencil of rays falling upon it, will scorch it like fire. What is more agreeable to the ear than the sound of the human voice? yet there are maladies in which the least whisper is torture. There are conditions of the body in which the odor of a rose, refreshing and innoxious as it is at other times, throws the patient into convulsions. We draw our breath, when in health, without effort, almost without consciousness; but

there are diseases in which our lungs cannot expand to take in the air necessary to life without effort and pain.

These examples show the existence of a susceptibility to slight causes and attenuated influences, produced and heightened by illness. The Homœopathic practitioner adapts his remedies to this preternatural susceptibility of the system. He prefers medicaments in a small quantity and a high degree of dilution, because experience has shown him that disease disposes the constitution to be affected by them, and because he finds them most safe and most effectual.

To the assertion that the cures claimed by the Homœopathic practitioners are effected by nature left to herself, the best answer is to refer the objector, if he will consent to observe for himself, to the cases of severe contusion healed almost immediately without leaving even the common discoloration ; to the whooping cough arrested almost at its beginning ; the croup and scarlet fever, so much dreaded by parents, subdued in a few hours ; the terrible lock jaw gently and effectually overcome, and diseases of the digestion, which the old method, with all its array of potent drugs, failed to cure, yielding to the new method with miraculous readiness. I might easily enlarge the list ; I might perhaps have made a better selection of instances ; but if these which I have given be not a delusion, they are more than sufficient for my purpose. In the mean time, there are some considerations belonging to this part of my subject which impress me so strongly, that I cannot refrain from setting them before you in answer to those who deny the efficacy of medical treatment, and by consequence, the efficacy of the Homœopathic method. When we talk of the healing force of nature, of her self-adjusting processes, of her power to restore the harmonious co-operation of the organs which has been lost by disease, what do we mean ?

Nature does nothing of herself ; she requires constant aid from without ; food, drink, air, exercise, a proper temperature, are conditions without which the healthiest body cannot remain in health, but must languish and perish. In sickness we have a thousand wants which must be attended to, and on the proper attention to which, the mitigation of our sufferings, and sometimes our recovery depends ; we vary our usual diet ; we pay particular regard to ventilation, to cleanliness, to temperature ; in short we take care not to leave nature unaided, and all men of all different opinions, even those who reject what is commonly called medicine, agree that this is necessary. The nature which is within us is constantly dependent on the nature which is without us, and needs every moment to be cherished, solicited, assisted, impelled by it. The animal machine cannot go on for a moment without the help of impulses derived from the external world ; and as its healthful movement is lost by means of external agents, so by means of external agents it is regained. Persons suffering with chronic illness are worse or better on certain days than on others, without being able to attribute the change to any thing but the weather, the temperature, the electric state of the atmosphere. Epidemic diseases make their appearance suddenly ; they disappear and are healed as suddenly, without our being able to give any other account of the matter, than that a certain general external influence, causing disease, has prevailed and passed away. We find that certain diseases in certain countries are mild and easily healed, while in others they are malignant and dangerous. We remark that the same disease is mild or malignant in the same country at different seasons. When the physician sends his patient abroad or to another part of the country, when he recommends a change of air, what is the purport of his advice ? He sends him in search of an external healing influence, an

impulse from without, which shall re-adjust the disturbed functions, and in many instances we know that his search is not in vain. The physicians who practice according to the Homœopathic method, the most diligent observers of the appearances of disease that ever lived, have collected a large mass of observations, showing how the maladies to which we are subject are mitigated or aggravated at different hours of the day and different lunar periods, in different temperatures and states of the atmosphere.

To me these observations seem to establish the conclusion that the idea of an internal, independent self-adjusting power in the animal system is a great error, and that the *vis medicatrix* is an impulse derived from without. Influences, not perceptible to the senses, and seen only in their effects on the health—influences, some periodical, others fluctuating—some regular, others accidental, whether proceeding from the minerals of the earth, or its vegetation, or its magnetic and electric fluids, or in some way from the bodies of which the solar system is composed, surround us on every side. How many of those instances of unexpected recovery to health, in which the usual course of a well known disease is surprisingly abridged, may be owing to these causes, I will not undertake to say, but if it be admitted, as I think it must be, that any such occur, it is enough for the present argument. It is the province of the Homœopathic practitioner to observe these influences, to connect them, whenever it can be done, with their origin, to imitate them when they are salutiferous, and to search for agents equally gentle, friendly, and effectual in their operation.

I might add, to what I have already said, many views of this subject, which, perhaps, would not prove uninteresting, if I had not already taken up so much of your time. I hope, however, that I have said enough to recom-

mend the Homœopathic method to the candid consideration of such among my audience as do not belong to the society whom I have particularly addressed, and to bespeak for it a fair trial. I know it will be said by some that it has been already tried in Europe, has failed, and is abandoned. You will find on inquiry that this assertion is not true; but it is hardly worth while for us to dispute with much warmth as to what may be thought of it beyond the Atlantic. We can judge of the question as well as our brethren of the old world, and we have as much interest in forming a correct decision. The prevalent system of medical practice is acknowledged to be very imperfect, and not always safe. The new practice comes before us with pretensions to greater certainty and greater safety. Its pretensions are supported by many sensible and disinterested men among us, who are not easily led astray by fantastic novelties, and who are in the habit of weighing and comparing evidence, and judging with caution. The question is too important to be hastily dismissed; the means of deciding it are close at hand; here is the disease and there is the remedy. Why if this were merely a question of form or color, instead of being an enquiry in which our lives and health are concerned, we should hardly be satisfied without looking for ourselves. If we were to be told that some learned philosopher in Russia had discovered that the broad firmament over our heads is of a pea green tint, our first impulse would be to cast our eyes upwards.

The Homœopathic method of cure has been called by many respectable persons a humbug, and this no doubt has had the effect of leading numbers to condemn it without further inquiry. But one of the worst of all humbugs, one of the most deplorable of all delusions, is that which leads men to shut their eyes to the truth, lest they should be laughed at for acknowledging it. He who is fooled by his own fear of ridicule is both fool and coward.

ON THE
HOMŒOPATHIC DOSES OF MEDICINE,
WITH IDEAS ON THE IMPROVEMENT
OF THE
MATERIA MEDICA.

BY C. NEIDHARD, M. D.,
PHILADELPHIA.

Several Homœopathic physicians have lately maintained, that the higher dilutions are better adapted to chronic diseases and the lower to acute. We have found the lower dilutions and strong tinctures as often applicable to chronic as to acute diseases. After the most careful examination of the patient and the selection of the appropriate specific, the cure could often be effected only by having recourse to larger doses, after smaller had proved ineffectual, particularly in very inveterate diseases. A good plan is to change occasionally the principal medicine for the next best specific, or to omit its employment for several days or weeks. Nature appears to receive its impression with renewed beneficial effect, whilst by continuing the same medicine for a long time, and by constantly increasing the dose, we will not accelerate the cure.

In the commencement of Homœopathic treatment in chronic cases, the higher dilutions ought always to be preferred, particularly as we are not acquainted with the sensibility of the patient to medicinal impressions; it is at least safest to begin with them. In a short time by repeating the dose, the patient will be able to bear larger doses without aggravation and with evident benefit. A lady, e. g. on whom *Calcarea carb.* in water produced at first the most violent aggravation, was able to take in a few weeks several drops of the tinc-

ture without the least aggravation and with continued benefit. I am aware that some Homœopathists have denied this, chiefly however on theoretical grounds. The thing appears to me extremely simple and subject to the same laws, whereby we become accustomed to use without detriment, many articles which are at first noxious to us; as tobacco, coffee, tea, &c., &c.

I have often observed, that, in commencing the treatment of a chronic affection with the 30th dilution, when the patient had almost regained his health, I had gradually arrived at the original tincture, lowering the dilutions by degrees, so that the harmony of the system was re-established. Very rarely have I found any good effect from the increase of the dose to any considerable extent in this material form, though I did not scruple to give, what might be considered very large doses. From this must be excepted however obstinate cutaneous diseases and some other affections, which generally require larger doses, because a new chemical effect of the medicine is wanted. An obstinate herpetic eruption, e. g. which resisted for a long time the influence of the best selected remedies, as well as *sassaparilla* dilutions, was finally cured by the tinct. *sassap.* 3i. daily, continued for several months. Dr. Sertimer of Goettingen is the author of a chemical method of treating diseases. I am far from being an advocate of it, but believe, that some useful hints may be deduced from his system, and that it may be found useful in cases where it is intended to resist the secretion of abnormal products. In *blennorrhœas*, cutaneous affections, some cases of *phthisis*, &c., such an action seems to be particularly applicable, provided the system is yet vigorous enough to bear it. Whilst Homœopathic remedies in their higher dilutions seem to exert a dynamical effect on the original fundamental cause of diseases (the true source of which we shall never discover) medicines, specifically

applicable to a case, exhibited in large chemical proportions, will act simultaneously in this fundamental cause, and pathological product. The relief in such cases is often so astonishingly great, that an old Homœopathist, when he witnessed the surprising effect of oleum jecinoris aselli in a case of scrofula of the bones, exclaimed, "I never saw such an effect from Homœopathic medicines," meaning, no doubt, in their dynamic proportions, where a mere chemical effect was wanted. It seems to me often entirely impossible to cure or even relieve such diseases by mere dynamical doses, and it is particularly so when we would have recourse to the chemical effect of the remedies. A solution of Natrum in water given in a case of phthisis tuberc., already far advanced, removed the salty taste and the abundant secretion of greyish brown pus; the expectoration became whitish and normal, and ceased entirely in a few days, together with the cough. Only the striking pain in the lungs, as well as a peculiar burning sensation all over the chest, lasted longer, and finally also disappeared. Frequent exercise in the open air, and Dr. Ramage's inhaler, were also found very beneficial.

In some cases of very obstinate, hemorrhoidal tumors, large doses were found of material benefit, and Helbry remarks the same with regard to the disease, incident to habitual inebriety, which he treated successfully with large doses of sulphuric acid. Helminthiasis, when there is such an abundant secretion of mucus, and similar diseases, require and can bear large and often repeated doses. But it will be well to make frequent omissions with the specific medicine, to wait for the reaction of the *vis medicatrix naturæ*, that we may not fall into the extreme of Allopathia and produce a medicinal disease. Individual cases must guide our judgment:

Est modus in rebus, sunt certi denique fines, quos
ultra citraque nequit consistere rectum.

In organic diseases of the heart, large doses of Iodine will often accomplish much.* Professor Werber of Freyburg has given the tincture of digitalis in drop doses, in a case of dropsy of the chest.

A. G. Schmid, of Vienna, gives even to very sensitive females the 1st trituration of nux vomica, the point of a knife full in a few spoonfuls of water, without discovering any aggravation, as he avers, if it is only specific, and believes that in many instances the so-called homœopathic aggravation, which was formerly so often observed, was nothing but the progress of the disease.

I will here give also some acute cases out of my own practice, where larger doses were resorted to.

In the *summer complaint of children*, the tinct. calc. carb., from one to ten gttae. is the only specific, where the following symptoms are predominant: loss of appetite, with great thirst, vomiting of all food, tongue red, like raw meat, in the middle, the edges looking natural, sometimes also coated with aphthæ, pallor faciei, and general emaciation, hollowness of the cheeks and the neck, peevishness, constant crying, diarrhœa of a greenish or yellowish color, mixed with mucus.

Prolapsus Uteri in the case of a young lady, æt. 24, caused by lifting a sideboard. On examination per vaginam, the uterus was felt low in the vagina, but could not be replaced, although several efforts were made for that purpose the second day after the accident; violent and very painful bearing down of the uterus. In the mean time calc. carb. i. gr. i. were given to her every three hours, and the same proportion I likewise ordered to be in-

* It is here where I have found a preparation of starch with iodine, (xxxii gr. of iodine to an ʒj. of starch,) particularly useful, and which, I believe, I was the first to introduce into Homœopathic practice.

jected into the vagina, and recommended a horizontal position. The second day, after having commenced taking the calcarea, in the morning, she suddenly felt great sickness of the stomach, became giddy, with darkness before the eyes, and almost fainted; the uterus began to work up and down, and she felt it return to its place; in a few days she was able to walk about again without pain or dragging down, and felt quite well. This effect of a Homœopathic remedy, was one of the most remarkable I ever witnessed. The symptoms indicating the calcarea in this case were: the prolapsus combined with the mechanical cause. Arnica, rhus, and other remedies generally used in affections produced by a mechanical cause, have not a specific effect on the uterus.

Mr. * * *, æt. 18, became, in the spring of 1839, suddenly affected with a violent inflammation and swelling of the tonsils, which enlarged in the space of twelve hours to such an extent that he was unable to swallow the least drop of any liquid. I immediately ordered him a gargle, consisting of three drops of the tinct. bellad. in several spoonfuls of water; the same quantity repeated every five or ten minutes, which enabled him to swallow some thin gruel in the space of two hours. The improvement continued under the influence of belladonna, which was now given in a smaller dose. The patient was perfectly cured in three days.

A similar affection in the case of a young lady, as promptly cured by the same remedy and dose.

Ophthalmia Scrofulosa.—Miss M—, æt. 12, of fair complexion, almost from her birth had been subject to enlargements of the glands of the neck, which suppurated several times whilst under Allopathic treatment, so that they became gradually indurated. She had also frequently suffered from erysipelas in the face, and labored under a hereditary enlargement of the neck; all these affections had subsided to a considerable extent during a Homœopa-

thic treatment of one year, when in the spring of 1841 she was attacked with an inflammation of the left eye, with the following symptoms: tunica conjunctiva of the left eye of a bright red color, with extreme intolerance of light, striking pain in the eye and head, particularly at night, paralysis of the upper eyelid, a large superficial ulcer on the cornea, towards the inner angle of the eye, profuse flow of tears, chills and fever, and bitter taste in the mouth, thirst and want of appetite, coryza on the same side as the affected eye. The symptoms being very striking for belladonna, I accordingly mixed gtt. v. of the tinct. in a wine-glassful of water, of which she took a teaspoonful every two hours. At the same time gtt. ten of the tinct. were mixed in a teacup of water, with which the eye was frequently washed. In the space of four days I had the satisfaction to see the inflammation completely removed; the pain had ceased the second day. The ulcer on the cornea was afterwards cured by repeated doses of silex and hepar. sulph.

With another case of scrofulous ophthalmia, I was not so fortunate, and cannot but ascribe the cause of my want of success to my not venturing immediately upon larger doses. This case occurred in a child, æt. 8, several months after an unsuccessful vaccination. The inflammation commenced in the left eye and soon involved also the right. The intolerance of light and irritability of the eye excessive. She cannot bear the least touch on the head, shooting pains penetrating the eyes upwards into the head. Tinct. arnic. gtt. vi. in half a tumbler of water, every hour a spoonful soon removed the symptoms of pain. The intolerance of light and excessive nervous irritability, however, continued. Small doses of conium. silex. sulphur, which were most specific in this case, did not prevent the cornea of both eyes from becoming opaque, so that the sight was entirely obliterated. Knowing too well from having seen many sim-

ilar cases treated Allopathically, that the old school is quite powerless in such cases, I did not have recourse to any Allopathic measures, such as blistering, leeching, &c., but now gave tinct. con. mac. gtt. iv., (which even in small doses always had had the best effect,) in water three times a day, which dose was gradually increased to gtt. iv., and directed the eyes to be bathed every two hours with the tinct. mixed with a little water. In four days from the commencement of this treatment the nebula began to disappear, and the sight was perfectly restored in two weeks.

Conium mac. seems to be particularly applicable in inflammations of the eyes of a *dark red* color, with great sensibility, paralysis of the upper eyelids, and when the patient is of a nervous temperament with dark complexion.

By using the conium in larger doses, I was soon after enabled to treat a similar case with more speedy success. These examples will be sufficient to show, that those Allopathists or Homœopathists who merely believe Homœopathia to consist in the small doses, have by no means comprehended our science.

The seat of the disease, the original strength of the remedy itself, idiosyncrasies, will also have an important influence on the dose of the medicine. In inflammations of the heart and brain, the smallest doses will suffice, whilst much larger doses may be employed in diseases of the mucous membrane; croup, e. g. will yield much sooner to aconite and spongia in the 6th or 3d, hepar in the 1st. than to higher dilutions of these remedies.* Belladonna, nux vom. lachesis, phosphorus, arsenic, are yet efficacious in the thirtieth dilution, whilst euphrasia, dulcamara, sal ammoniac, &c., will be found more useful in lower dilutions.

As to idiosyncrasies, it is well known that some persons are violently affected by certain articles of food or by medicaments, which

produce on others a very trifling effect or none at all. Vinegar, fruits, and vegetables, for example, produce a very powerful effect on some persons, whilst others may partake of them without the slightest inconvenience. Some, again, cannot take meat without deranging the system. A patient of mine could not partake of the smallest piece of meat, without feeling great pressure in the stomach, and other distressing symptoms. In the case of a lady, subject to fits of melancholy, the mere touch of the white of an egg, caused, what was most remarkable, a very visible *white* swelling on those parts of the hand and arm which came in contact with it. The same lady could not take a drop of laudanum without exciting most violent symptoms.

The facts, however, gathered from the experience of Homœopathic physicians stand yet too isolated. They require a more scientific basis, to be used advantageously in all cases. To give Homœopathia such a basis has been the endeavor of Homœopathists for several years. That the Homœopathic materia medica ought to be regarded as a natural science, and studied as such, was first announced by Dr. Const. Hering; in his excellent preface to his work on Lachesis, some valuable suggestions are given in this respect. Bönninghausen, also, in his "Verwandschaften," has profited by the idea of Hering, in furnishing us with a short analysis of the affinities of Homœopathic remedies. He has long held similar opinions, and the following appears to me the groundwork, according to which the study of the materia medica ought to be conducted. As every human physiognomy has its individuality, so, in like manner, has every disease. Every vegetable, mineral, or animal pathogenetic substance will correspond to one or the other of these individualities. All should, therefore, be incorporated into the materia medica, and their special influence upon man investigated. None can be left out, a priori,

* See Rau. Organon, p. 360.

as useless, until the harmony of nature with mankind has been re-established. As there are certain affinities between nations, so there are between different classes of men, in their corporeal and spiritual qualities. The same is the case with diseases, many resemble each other very much, although they are never perfectly alike. Certain classes of remedies must therefore correspond to certain classes of diseases, one remedy, however, perhaps only specifically to its appropriate case, man with his complete individuality.

The necessity of strict individualization of every case, will always make the practice of Homœopathia very difficult; but I believe, at the same time, that judicious classifications will abridge the labors of the Homœopathic practitioners in each particular case, to a great extent.

Before, however, we shall be able to classify the materia medica, we must obtain a correct idea of diseases. Mankind must be classified for this purpose according to country, climate, original conformation, habit and education, the latter of which may be the consequences of the former. The general characteristics appertaining to all nations are also to be added. Here the science of statistics, hitherto little attended to, will prove of immense advantage. "Like the east side of mountains, valleys, rivers, climate, earth, and mineral strata, etc., produce a different Flora or Tanna, so they impress upon man and his diseases a particular character."*

Many diseases of the Italians differ from those of the Germans, and again, between Northern and Southern Germany the same discrepancy prevails. The inhabitants of New England are subject to different diseases from those of the Southern states. It has also been generally remarked, that the English possess less susceptibility to medicinal impressions than the Italians or Saxons.

Having laid the foundation in this respect

with regard to diseases, the Homœopathic school will next have to devote its attention to investigations of the Homœopathic remedies, according to their color, form, smell, taste, chemical and botanical affinities, in which respects very little or nothing has hitherto been done, although these investigations will certainly be found of incalculable importance for the elucidation and confirmation of the symptoms obtained by experiments on the healthy organism, and the experience derived from clinical observations. The cause of this neglect must be sought in the inability of the ancient writers to arrive at any conclusive data from such investigations, and it was consequently not thought worth while again to pursue the same unprofitable course. The error of these writers consisted in their endeavoring to classify the whole science exclusively on one or the other of these points, instead of *making use of the whole of them as important guides for the symptomatology in health and disease*. What affinity or correspondence, for example, exists between a remedy of such a certain color, taste, chemical composition, and such characteristic symptoms and another which has one or several of the same characteristics? In what do they differ? and in what points are they alike? It is evident, that from a severe and thorough study of these and other points, the most useful practical hints will be derived. Our labors on this subject are yet too little matured, to be communicated to the reader. We deem it for the present sufficient to have drawn attention to the subject, that other observers may unite with us in the investigation of this highly important and at the same time interesting subject.

That a substance is white, yellow, red, etc., has a certain smell, a bitter, acrid taste, or an exterior aspect of a peculiar kind, etc., must have a practical tendency and bear reference to a particular constitution and disease.

As accessory means of the utmost import-

* See Helbig Heraclides, preface.

ance must be considered systematic experiments with the different articles of food: 1st. The effect on the human system of living solely on animal food and water, or on a particular kind; as, mutton, beef, pork, veal, venison, etc. the quantity taken daily to be stated, and the health of the animals to be regarded.

2d. On vegetables only, or on any particular vegetable, as, rice, bread, potatoes, for one, two, three or more months.

Similar experiments must be made with milk and oil; (how important the fact that in Provence, where a great deal of oil is used as daily food, a difficult case of parturition is hardly known; the same is the case to a great extent in Spain.)

That a great degree of self-denial and patience is necessary to undergo such experiments, ought not to deter us from the undertaking. The reformed school will at least possess the honor of having first attempted this great labor. No one will deny the utility of such knowledge to the physician. It will bring our science nearer and nearer to that perfection which we all so much desire.

It is true, some partial knowledge we do possess on this subject, but a scientific examination, such as is demanded by the Homœopathic school, furnishing minute information on every article of food and its influence on the individual constitution, has not yet been attempted. We know, perhaps, generally, the effect of living purely upon rice, as in the case of the inhabitants of the East Indies, on vegetables, with the Grahamites of our own country, or on an exclusive animal diet, upon the trappers of the West,* who are notorious for their ferocity; but an accurate account of all the characteristic symptoms, inherent in one or the other of such modes of living we do not possess, because scientific observers have not as yet undertaken to investigate the subject.

* See Washington Irving's Astoria.

In giving this short outline of the important labors that the reformed school of medicine have yet to accomplish, I know but too well, that as long as the majority of the students at our Universities are devoting their time to unprofitable practical studies, falsely so called, little can be expected for the present in the promotion of such researches. The idea of them, however, will not die; they will be established in all their magnitude as soon as our present medical teachers shall be supplanted by others, who have more correct views of the only true method by which the improvement of the materia medica can be advanced—that is, by regarding it as a branch of natural history.

PURE EXPERIMENTATION.

FROM THE FRENCH OF

DR. LEON SIMON,
PARIS.

BY JAMES M. QUIN, M. D.

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Among the fundamental and essential principles of Homœopathy, one of the most remarkable, and that which has furnished the most satisfactory results, is, undeniably, the principle of *pure experimentation*. It has been long a question, whether it is sufficient for every *exigency*, while no one has yet dreamed of ascertaining whether we have extracted from this principle all that it is capable of furnishing.

We cannot question the utility of *clinical observation*, but we must also acknowledge its narrow limits, at least in the actual state of the science. All the schools of every country agree on this point, that each disease is an individual case, *resembling* all the cases of the

same kind, but being *identical* with itself alone. This point of medical diagnostics, barren in the hands of Allopathy, has become extremely fertile in the hands of Hahnemann. A severe logician, he alone has frankly admitted the conclusion from antecedent premises. If every malady is an individual case, we must individualize the treatment: this was an irresistible consequence. Allopathy, on the contrary, falls into the inconsistent contradiction of generalizing the treatment, and individualizing the disease. Of what use, then, is clinical observation to it, since the facts which it relates, have their therapeutic treatment marked out in advance, according to the condition to which each of them is referrible? For ourselves, who individualize both the diseases and the therapeutic means, clinical observation has a real meaning, but always subordinate to pure experimentation. Every disease is composed of three orders of lesions: modifications in the manner of *feeling*, modifications in the mode of *acting*, modifications in the *organic texture*; in other words, *lesions of sensation*, *lesions of function*, *lesions of texture*. Every one will acknowledge that one or more functions cannot be disturbed, unless the organs appointed to fulfil these functions be modified in their contexture; unless, besides, this modification be either temporary or permanent; whence it follows, as a consequence, that a disease is truly known, only by the three-fold relation of organic modification, lesions of sensation, and lesions of action.

Let me not be misunderstood. Much has been said in Homœopathy about *vital forces* and *vital reaction*, *dynamic lesions* and *dynamic diseases*. It is well done to restore to their due importance, words and ideas, which medicine, styled organic, has, in its ambitious pretensions, misconstrued, for want of understanding them. But let us not, in our turn, forget what there is of truth in this *organic* medicine.

Could it be true that a group of symptoms composed of lesions of sensation and of action should not correspond to one or more organic lesions? Could it be true that the knowledge of these lesions should be superfluous for Homœopathy? To ask the question is to answer it, for one who defines disease in general, to be the knowledge of the *universality* of the symptoms; nothing is unimportant, lesions of texture any more than the others. Indeed, the materia medica details with extreme care all the lesions of texture that pure experimentation presents for observation on the exterior of the body. Why should that which is useful to be told in the diseases of the skin, of the hair scalp or of the mucous orifices, lose all importance, when we treat of the lesions of texture in organs more deeply situated?

The point in discussion is then reduced to a very simple inquiry: has pure experimentation revealed to us the knowledge of all the organic alterations that diagnostic means furnish us? Is it possible to obtain this knowledge by pure experimentation? To the first question the answer seems to me to be negative, while I believe it to be affirmative to the second.

It is true that we are far from knowing yet the full power of Homœopathic means. In the pure experimentations which have been made, no one has ever dared, or ever will dare, to push experiment as far as the production of tubercles, the development of schirrous or cancerous affections, softening of the spinal marrow or of the cerebral mass, softening of the osseous system, dropsy of the pericardium, ascites, real epilepsy, insanity, (a disease which we must not confound with acute delirium,) croup to the extent of the production of false membranes in the larynx and trachea, white swelling of the knee or elbow, &c.

These are, at the same time, the diseases with which we have daily to contend, diseases which we treat with an indisputable superior-

ity, to consider only the feeble resources of Allopathy under similar circumstances, but which require much time, much and tedious investigation, before gaining our end, and which subject us to groping about in the dark, from which Homœopathia ought to save its able followers.

How do we now arrive at the choice of the medicine? As follows:

When we meet with diseases, called in Homœopathia diseases of a fixed character, as itch and syphilis in their primitive form would be, scarlatina, miliary fever, variola and varicella for acute diseases, what determines our choice, above all, but not absolutely, is the character of the eruption. This mode of determining I will style, the *direct* mode.

In diseases, on the contrary, like tubercles, ascites, softening of the brain in rachitic persons, and so many others, in which we have not ocular inspection of the alteration of texture, we proceed by the *indirect* mode: as follows:

Let us take as an example the *pneumony* styled *acute*. Every body knows that we recognize three stages of this disease: 1st. the simple engorgement; 2d. the red hepatization; 3d. the purulent infiltration. The symptoms of each of these periods differ, first, from one another, secondly, in the sympathetic symptoms to which they give rise. If we were to proceed by the direct mode, we should say—"we are in the period of engorgement of the peripneumony; this period has for its direct and pathognomonic symptom, the *râle crépitant*:" we should give the medicine which covers this symptom, from which all the others in acute peripneumony are derived. But Homœopathia has not as yet discovered how to avail itself of the benefit of the stethoscope: how then does it go to work?

It relies on the febrile state, the character of the cough, the expectoration, moral symptoms, &c., that is to say: it takes the aggregate of

all the symptoms, other than the direct, essential and pathognomonic symptom, and the physician proceeds to search for the medicine, which, by the totality of its pathogenetic symptoms, corresponds most exactly with the *ensemble* of the morbid indications. Homœopathia arrives at happy results by this circuitous route, and, at the same time, sufficiently certain, if we compare its results with the success of Allopathy; but it does not yet pursue the shortest and most direct path.

In pneumonia, indeed, the stethoscopic signs alone indicate with certainty the anatomical condition of the inflamed lung. They give the characteristics of the *genus*, which in this case, we may call the pneumonic *genus*; the character of the cough, of the expectoration, of the respiration, give, in their turn, the characteristics of the species. The febrile state, the sympathetic reaction on the organs, distant from the organ chiefly deranged, give the characteristics of the morbid individuality, and a single species embraces necessarily a plurality of individuals.

Beyond doubt, the anatomical condition of the diseased organs is not the whole disease; we must join therewith the knowledge of the physiological symptoms, that is, the lesions of sensation and of action; but it is only on this triple condition, that we possess the universality of the signs of a disease. If Allopathy commits an error in attaching itself too exclusively to the recognition of the lesions of texture, let not Homœopathia fall into an equally dangerous fault in neglecting these lesions of texture. It is on this condition only that it may be said, measurably, to individualize the disease as absolutely as Hahnemann desires.

The foregoing notions would acquire a much greater force, if I were to speak of the diseases called organic, as pulmonary phthisis and cancerous affections.

Never, thus far, has pure experimentation

been pushed far enough to develop in a healthy man a true tubercular phthisis or a carcinomatous affection. But as a phthisis or a cancer cannot exist without developing forthwith an entire train of symptoms, in the other organic apparatus, it is these symptoms much more than the direct symptoms which dictate to us the treatment : and the relative certainty of the medicines that they furnish, is drawn from this consideration, due to the genius of Hahnemann, and which no one can question.

Tubercles and cancers are dynamic affections resulting from an infection of the organism by a miasm, a virus. Under this denomination, before the cancer is fairly marked out, before the development of the tubercles, the organism is disturbed in all its parts, and the signs of the difficulties experienced, disappear sometimes before the appearance of the cancer or of the tubercles, and sometimes also continue to acquire a new intensity in proportion to the progress of the disease. Thence is derived the high importance attached in Homœopathia to the anterior forms of chronic disease. We would have but an incomplete picture of the disease, if we were to confine ourselves to the study of the actual state ; since, proceeding by the indirect mode, it is much more the character of the diathesis, than that of the organic condition, which fixes the attention of the Homœopath.

This is the knowledge in which we are deficient, and which we are obliged, at this late day, to seek at the hands of pure experimentation. By what means can we arrive at it ? It is not by experimenting on man that we can obtain it, but on animals. The *pure materia medica*, such as it has been conceived and executed, is rich in relation to the lesions of sensation and of action, but very poor in whatever appertains to lesions of texture. The former could be obtained only by experimenting on man ; in regard to the latter, the entire animal kingdom can furnish them.

Each class of the animal kingdom acts in a manner peculiar to itself, by reason of the sensibility with which it is endowed. No possible identity can then be established between the animals and man in the double relation of lesions of sensation and those of action. But with regard to the lesions of texture, the resemblance is perfect.

Unity of design and unity of organic structure, are two principles, which at the present day have acquired in physiology the force of a law. It is universally acknowledged that the anatomical difference between animals and man, consists simply of a difference of form which does not affect the elementary and constitutive tissues of the several organs and apparatus. Further, the pathology and therapeutics of the veterinary art have been, and still are, but a result of human pathology and therapeutics. At all times these two sciences will undergo the same changes, will experience the same fortune.

We may, then, seek from vivisection the completion of our *materia medica*. Indeed, we may take up anew each one of the medicines whose symptomatology is known to us, and experiment with it on a series of animals, during a time sufficiently long to attain the utmost limit of the pathogenetic powers and effects of each substance ; this limit is the death of the animal. Thus, and thus alone, can we turn to our own profit, in appropriating it to ourselves, the anatomico-pathological view, which is the true glory of the old school, and soon see the day when Homœopathic pathology shall be fixed.

But "experimentation is difficult," Hippocrates has said, and who can contest this point ? it is only beneficial on condition of its being systematic. The conditions of the experimentation, it seems to me, should then be dictated *a priori*. This will form the subject of another article.

MATERIA MEDICA.

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CHAPTER IV.

In the course of our occasional contributions under this head, we have attempted to exhibit some of the most prominent causes that have led to the present imperfect state of the materia medica, or, speaking more correctly, that have prevented this branch of medical science from advancing beyond a very crude and imperfect condition. We propose to continue the subject in this number, and shall show, by an examination of the various methods that medical men have resorted to, for ascertaining the properties of medicines, how little could be reasonably expected from any of these different plans.

In the early ages of human society we may suppose that accident gave rise to the discovery of curative virtues in certain articles, and that random experiments, in the earnest hope of alleviating pain, or averting death, may have revealed others. By whatever means the invention of remedial agents first took place, their application in the treatment of diseases, so far as we are enabled to learn from imperfect historical and traditionary records, was so mingled with priestly arts, and religious ceremonies, as to do but little towards correcting the mistakes or supplying the deficiencies of the first rude attempts at the art of healing.

Even these imperfect sources of information, however, it might be supposed, would, in the course of years, furnish a store of experience, sufficient for the purposes of the physician, or, at the least, supply such data as

would enable him to discover the principles of a correct practice. But, beside the very general belief in the supernatural origin of diseases, prevalent in those early times, which led to the employment of amulets, incantations, charms, and other superstitious practices, to propitiate the offended deity, or to exorcise the evil-working demon, the attention was distracted from the prosecution of pure observation, by other causes, scarcely less disastrous to the cause of science and humanity. The confusion of names, the want of well-defined terms, imperfect principles of diagnosis, the use of secret remedies, arising often from the jealousies of physicians themselves, the passion for multifarious combinations of drugs, often entirely incompatible, in the same preparation, and the rapid succession of doses of the same, or different prescriptions, without allowing time for the development of the effects of either, must have rendered it impossible to acquire any considerable degree of available information from any amount of such experience. Indeed, every successive year of experimentation conducted under such circumstances, would rather tend to increase the confusion. It will, perhaps, appear in the sequel, whether some of these obstacles to useful enquiry have not exerted an influence even in more modern times.

That we are indebted to accident for a knowledge of certain medicinal properties, possessed by some particular substances, cannot be doubted; yet no physician earnestly desirous of establishing a correct mode of practice, could for a moment be satisfied with so imperfect and uncertain a dependence. He would seek to discover some mode by which he could extend his knowledge of medicines without waiting for the result of accident. Accordingly, we find that very early in the history of medicine, attempts were made to establish rules for judging of the medicinal properties of drugs.

One of the earliest modes resorted to for this purpose was the observation of their sensible qualities, and from the result to deduce their remedial powers. The color, taste, odor, and specific gravity, and other evident properties, were supposed to indicate the otherwise unknown virtues of all substances used as medicinal agents. This mode of ascertaining the uses of drugs, especially those belonging to the vegetable kingdom, has even been resorted to in more modern times, and has the sanction of several names of high authority. Sir John Hoyer, David Abercrombie, and Hoffman,* names well known in the history of our subject, have not only sanctioned it, but have prepared systems of the materia medica founded, to a considerable extent, on the distinction observed in the taste and smell of the different articles. It would seem to require but the slightest consideration, nevertheless, to demonstrate the utter insufficiency of these tests as a guide to the knowledge of their medical virtues. Besides the difficulty in many cases of ascertaining and of defining the differences in these respects, where they exist, there are many medicines that have little or no apparent taste or smell, and yet produce very powerful effects upon the human system. Thus *arsenic*, which possesses so few sensible and external qualities that distinguish it from the most inert substances, as to be frequently taken by mistake, is well known as one of the most active poisons that we possess. Were this principle true, we should attribute the most active and well defined properties to those substances in which the taste, smell, or other qualities were strongest and most easily distinguished, which the least observation shows to be contrary to experience. The onion, garlic, assafoetida, anise, amber, castor, and many others in the several kingdoms of nature, should possess the most ac-

tive and easily ascertained powers, whereas their true, or at least their ordinary use does not by any means correspond to that idea. So, on the other hand, who would expect to procure any prompt or efficient action from the mild and often agreeable rhubarb, bitter-sweet or castor bean, the almost tasteless tartar emetic, calomel, and other equally prompt and efficient drugs? It is, indeed, a wise and beneficent provision of nature, that many things, especially among plants, where they would be likely to be taken as food, which are deleterious to the human frame, are guarded by a nauseous taste or smell, but which cannot guide us in their application in diseases. The color of plants has been taken as an index to their medical properties, by a no less celebrated author than Linnæus, who seems to consider that, together with taste and smell, to designate their peculiar virtues. The following are some of his rules on this subject. "A pale color indicates insipid, — green, crude—yellow, bitter—red, acid—white, sweet—black, offensive," &c. Were he correct in these rules, it can easily be seen, from the generality of the terms used, that after all, our knowledge of the real effects of the plants is not increased in the slightest degree; but Dr. Cullen remarks on this same point, that "nobody, possessed of the smallest knowledge of plants, can fail to make so many exceptions to these, as to perceive that the attempt to establish such general propositions, is *extremely frivolous and useless*." Although Dr. Cullen speaks so freely respecting the insufficiency of external qualities in pointing out the virtues of medicines, he seems to have sometimes fallen into the same error that he condemns in his predecessors and cotemporaries. Thus he attributes the anti-spasmodic effects of assafoetida, cuminum, &c., to their fœtid odor; and he explains the operation of the peruvian bark, in the cure of intermittent fevers, by its sensible qualities of bitter

* Introduction to Cullen's Materia Medica.

and astringent. This opinion has led to the adoption of other substances, possessing in a greater or less degree, the same qualities, as substitutes for the peruvian bark, such as the *salix alba*, *serpentaria*, *ignatia amara*, *gentian*, &c., yet without any such results as we should have been led to expect from the confidence with which it was asserted. Besides, as intermittent fevers are frequently cured by other medicines, for which no such qualities have ever been claimed, we must conclude, that, even this instance, sanctioned by such high authority, presents only another evidence of the general fallacy of the doctrine.

It is evident, that this principle, if carried out, could not be otherwise than highly disastrous to the cause of medical science and humanity, by enlisting the confidence of practitioners in certain remedies on grounds altogether fallacious, and by inducing the neglect of others of real value. That this has been, in fact, the case, a casual examination of medical history will demonstrate.

Somewhat allied to this mode of determining the medical uses of drugs, is another, which, so far as we know, was derived from Hippocrates, but which was greatly enlarged, and strongly insisted upon, by Galen. It can scarcely, however, be entitled to the name of an investigation, as the qualities attributed to drugs were, for the most part, rather imaginary than real. As many diseases were supposed to depend upon an inequality in the four qualities of heat and cold, moisture and dryness, the different articles in the *materia medica* were supposed to possess these qualities in different degrees, by the due administration of which, the deficiency or excess in any case could be rectified. For hundreds of years this principle of explaining the operations of medicines, influenced the prescriptions of physicians, without, however, advancing medical science, as we may easily suppose, a single step. It could not, indeed,

be otherwise, when so much of the practice of medicine consisted in the application of drugs possessing imaginary powers, depending on supposed qualities, for the relief of diseases not less hypothetical in their nature. Are not the popular ideas respecting the drying, cooling, and heating properties of certain drugs to be traced to this doctrine of Galen and his predecessors?

After the age of Paracelsus, we find new doctrines of disease, dividing the medical world, and, as a consequence, not only the introduction into the practice of medicine, of a large number of new and hitherto untried remedies, but such of the old ones as were retained were administered on entirely different principles. The impulse that was given about this time to the study of chemistry, led to the application of chemical principles to all the phenomena of life; the human body being considered little else than a moving laboratory, in which was constantly going on a series of chemical changes. The operation of medicines was therefore thought to be regulated by the same laws. Accordingly various theories were formed to account for "all the ills that flesh is heir to," on the most approved systems of chemical reasoning of the day. One of the most prevalent of these (which has already been referred to in a previous number) was that which attributed all diseases to an excess of acid or alkali in the system. Of course the powers of chemistry were supposed to be sufficient to determine the applicability of all drugs to the treatment of diseases, and to refer them to their appropriate classes. Every article in use was subjected to the requisite tests, and from its real or apparent acidity, or alkalinity, and the degree in which it was manifested, its appropriate range of action was decided. Nothing could be desired more simple and philosophical, had the theory of "fermentation," as it was called, on which it was founded, proved a correct prin-

ciple. But alas, the doctrine that diseases consisted in an undue proportion of acid or alkali, was not susceptible of the slightest proof, was a mere fiction of the imagination, and like the preceding fanciful hypotheses, that had usurped the belief of medical men, it fell and carried with it the whole elegant superstructure.

As chemistry, however, has within the last half century acquired a certainty and perfection, to which it was previously unknown, it may be supposed that the results of chemical analysis would naturally throw much light on the medicinal uses of the various substances submitted to that process. This supposition arises from the mistaken views of the animal economy, which undoubtedly are derived from the countenance formerly so completely given to the doctrine of animal chemistry. It assumes that the human system is subject to the same laws as inanimate matter—that the action of chemical affinity is the same in the body as without; whereas, the fact is, there is a very great and important distinction to be observed. The vital forces which carry on the operations of the living body, present a strong resistance to the ordinary action of chemical agents. They may, indeed, be presented in such a state of concentration, as to overcome the vital opposition, and disorganize the parts with which they are in contact, or act as powerful irritants. But in these cases, if life is not actually destroyed, a course of action is aroused in the organism, bearing no analogy to that of a mere chemical effect. Thus, if one swallows a quantity of corrosive sublimate, oxalic acid, nitrate of silver, or any other irritant poison, the vital principle may not be sufficient to overcome the disorganizing effects of the agent on the stomach, and the destruction of the organ and death may ensue, but the process will produce effects throughout the system, fever, inflammation, pain, which can only be referred to the vital sym-

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pathies. Chemical agents may act according to their natural affinities on the contents of the stomach, as in the case of poisoning, where antidotes are given, for the direct purpose of neutralizing, or decomposing the irritating substance, but even in this most favorable case for the advocates of the chemical doctrines, it is evident that the effect, as well of the antidote as the poison itself, is not *merely* chemical. If it were so, the decomposition of the poison itself should effect the cure, whereas, what are called the constitutional, or remote effects, frequently require a long period of time for their removal, and, perhaps, resist all the remedial means of the medical attendants. What reason can the chemist give, why corrosive sublimate produces effects upon the system so very different from calomel, or the other forms of mercury? The difference in their chemical composition is comparatively trifling. To illustrate our position, let us trace the changes of some substances, the effects of which on the system are more or less known. *Charcoal* is described in the books as an antiseptic, tonic, and febrifuge. *Oxygen gas* when inhaled alone is remarkable for its exciting properties—the pulse becomes rapid, the respiration greatly increased, and the whole system highly excited. Like all other exciting agents, its action is followed by debility, and, if persisted in, by death. A chemical union of these two substances forms *carbonic acid gas*, which, so far from combining the properties of both, is found by sad, and too frequently fatal experience, to be a highly deleterious and dangerous substance. *Potassa* is a powerful caustic, destroying all animal substances with which it comes in contact. Unite this last with the carbonic acid, and we have a mild alkali, the chief use of which, in ordinary medicine, is to correct derangements of stomach, arising from real or supposed acidity. Now, it is evident that no chemical knowledge, however accurate

or extensive, could explain beforehand, what effects would follow the use of these articles, either in their simple state, or in combination. The union of two or more inert or innoxious substances, may form a highly dangerous compound, and, on the other hand, others which *alone* are very powerful agents, by combination may become harmless or mild, in their operation on the human organism. If thus little is to be learned of the effects of drugs on the living system, from the chemical analysis of minerals, still less can we depend upon any such process, when applied to plants. Nearly all plants, the most poisonous as well as the most wholesome and nutritious, are found to consist essentially of the same elements, and frequently in proportions so much the same, as to defy all the skill and acuteness of the chemist, to detect the difference.

The uses of chemistry to the medical student are many, and the science forms an essential part of his education, but it cannot discover for him the effects of medicines on the healthy or on the sick.

There is still another method, which has had its advocates, for establishing the medical qualities of drugs—we refer to the search after botanical affinities. In almost every treatise on Botany, we find certain general properties attributed to the different orders of plants; and there would seem to be some natural foundation for these opinions, for it has been noticed, that where the groups of plants exhibit among themselves a strong botanical resemblance—where the structure, habits, and general character are analogous, there is also a similarity, at least in some points, in their effects upon the living system. It is, however, *only* in some points, and those not always the most important, and not even those, except in strongly marked cases, and we may add that there are after all, so many exceptions as to render the rule a very unsafe one, and utterly inadequate to the purpose intended.

It is only necessary to instance a few of the many discrepancies of this kind, to remind our readers of others equally remarkable. The deadly nightshade, the poisonous bitter-sweet, belong to the same genus with the wholesome potatoe; the drastic colocynth, and the savoury muskmellon, are equally nearly related, and it would be sufficiently easy to cite several other cases not less striking, not to mention a multitude of those which differ in a less degree. It will be noticed, however, that botanists have, for the most part, made use of such vague and general terms, that were their analogical influences more correct than they are, the information derived from them could not be safely applied to the use of medicines in disease. Thus the whole natural order of the *cruciferae*, is designated as "*antiscorbutic* and *nutritious*," which, however the plants comprised in it (amounting to several hundred,) may agree in these particulars, nevertheless, greatly differ among themselves in many other points equally important; the most heedless practitioner would be utterly inexcusable, who should use or recommend their indiscriminate use, on account of their botanical affinity. Another reason for want of confidence in any such general classification—and it will apply with equal force against all those which have been already mentioned, as well as to the theory of botanical affinities—is that those articles which agree most nearly in their ascertained properties, differ very considerably in the *degree* of strength which they possess of these properties; which differences are not indicated by any external marks, or corresponding variations in structure, composition, or sensible qualities. Besides those properties which are possessed in common by several plants, each one, no doubt, has its peculiar virtues, and produces some effects which belong to it alone. From these considerations, therefore, we may conclude that any attempt to ascertain the medical

virtues of plants by an application of the rule of botanical affinities, must be in the highest degree uncertain and unsafe, and, therefore, an improper test of their appropriateness to the treatment of any disease.*

Besides these methods we have mentioned, there are two or three others which deserve some notice at our hands, not so much from any real, or even apparent applicability to the end proposed, as the extent to which they have been employed. One of these modes arose from the mechanical or mathematical theory of medicine, to which we have adverted in a previous chapter. According to this theory drugs were supposed to owe their medical effects to certain real, or supposed physical properties, inherent therein. The specific gravity, the form, sign, arrangement of the atoms, the friction of particles, &c., were the terms that were supposed to explain all the phenomena of therapeutical action, so that the principles of hydrostatics and hydraulics were applied to the living system, as if it were a mass of crude matter, influenced and regulated by the same laws which govern inanimate substances. It is really astonishing to look back at the number of distinguished names that were entirely in favour of this system; but as, after a comparatively brief reign it fell of its own utter fallaciousness, it does not require any refutation from us. As formerly the best chemist was reckoned the best physician, so now the most accomplished mathematician stood a chance of attaining the like reputation.

* We would not be understood to undervalue the use of botanical knowledge to the medical practitioner, and particularly to the Homœopathist. The importance of this study has been fully set forth, in an editorial article, on "the educational requirements of the Homœopathic physician," in the 1st number of the 2d volume of the Examiner.

The last mode which we shall refer to, not founded directly upon experience, for discovering the virtues of drugs, is known in the history of medicine as the "doctrine of signatures."

This doctrine consists simply in tracing some real or fancied resemblance to some organ, fluid, or part of the human frame in certain plants, which resemblance was supposed to afford an indication of the part to which its remedial action was chiefly directed. Of this the well known example of the *Chelidonium* is an instance. To the yellow juice with which it abounds, it owes its former reputation for the cure of jaundice. The *Orchis root*, from a resemblance to certain sexual organs, was supposed to exert a powerful action in cases of weakness and impotency of these organs. To what other cause can we attribute the introduction into the materia medica of the *rubia tinctoria*, or madder, once famous for its use in jaundice, and as an emmenagogue? of the *prunella*, formerly recommended in diseases of the throat, from the shape of the flower? of the *Lithospermum*, in breaking down and dissolving urinary calculus, because its seeds are hard like stone? The older treatises on the materia medica abound with instances in illustration of this doctrine, but as we are not aware that it has at present any advocates in the profession, (although the time has been when powerful names were enrolled as strong adherents to it) no necessity exists for any formal refutation of so visionary a scheme. Though the doctrine itself has no advocates, yet it would not be difficult to detect examples in the more modern collections, the introduction and continuance of which it would not be easy to defend on any better grounds.

We have thus reviewed the most prominent modes that physicians have resorted to with the laudable desire of discovering the medicinal powers and uses of drugs, and we have seen how calculated any or all of them are to

accomplish the desired end. The question arises, then, what must be done? If neither mathematical calculations, nor "signatures," nor sensible qualities, nor yet chemical analysis, or botanical affinity are sufficient to reveal the properties of medicines, by what process can we discover them, so that we may practice medicine with safety and certainty? The plain answer would seem to be, "*by experience.*" This brings us back again to nearly the point from which we started, and although the medical profession, with the hope of finding some easier and more certain mode of acquiring this all important knowledge, have plied all arts and resorted to all expedients, they must come to the same conclusion, that the virtues of medicines can only be certainly acquired by experiment. Dr. Cullen declares that "an experience of the effects of substances upon the living body, is certainly the only sure means of ascertaining their medicinal virtues;" and a more modern writer of our own age and country, remarks that "it is by empirical trials, that we become informed of the properties of any medicinal agent."*

But we here meet with new difficulties, and numerous questions arise as to the manner in which our experience is to be acquired; the consideration of which we must necessarily postpone to another chapter.

CARBO ANIMALIS.

IN INDURATION OF THE PANCREAS.

This remedy has afforded us essential service in induration of the Pancreas, and we are glad to perceive that Dunglison quotes Siebenhaar, as a witness of its utility. Further contributions on this point will afford a real service to our art.

* Dr. Dunglison. General Therapeutics, p. 19.

HOMŒOPATHIC THERAPEUTICS.

TRANSLATED FROM DR. BEAUVAIS' EDITION
OF DR. BIGEL,

BY

JAMES M. KITCHEN, M. D.

No. XI.

PNEUMONIA—INFLAMMATION OF THE LUNGS.

For the description, etiology, diagnosis, and prognosis of this disease, we refer our readers to Laennec, and other standard authorities, and pass at once to the therapeutics of it.

Is bleeding useless, or should it be practiced in certain cases of this disease? This question has not been definitively settled yet, though Homœopathy dates nearly thirty years, and though pneumonia is not a rare disease, and that experiments with Homœopathic means are fashionable. If we make a somewhat closer examination, we shall soon see that a conclusion is impossible, so long as we do not take another method to arrive at the solution of this important question. The majority of Homœopaths have not been able to renounce the dogmas of the old school—they have always in view the precepts of Allopathy—blood must be drawn in pneumonias—they consider it a happy circumstance that there exist means which render blood-letting useless, if not superfluous, in the majority of cases—as if blood-letting was a *sine qua non* condition of cure, in the non Homœopathic treatment.

I think the question should be thus put.—Is blood-letting really necessary, is it only useful, or wholly superfluous, in the treatment of pneumonia?

Experiment, as well as theory based on observation, does not seem to confirm the necessity of blood-letting in pneumonia.

Dr. Renzi, physician in chief to the Vienna

hospital, faithful to the doctrine of Brown, has never drawn one drop of blood in pneumonia, whilst in other clinics, recourse has been had to abundant abstraction, which was fully, as they thought, indicated by the symptoms. The proportion of cures to deaths is most favourable to the first method. Pneumonics cured without blood-letting get up much sooner, a long convalescence being the exception. This experience is furnished, not by isolated cases, but on a large scale, since one ward contained two hundred beds, all filled at the same time. From these it results that it is indifferent whether blood-letting is had recourse to or not, and that we make a great mistake, in supposing it so singularly efficacious, as all the professors wish to teach their students. The last winter, in the same hospital, there died in one of the wards, where blood-letting was carried on after the method of the schools, eight out of twelve patients, that is to say, two thirds, by no means a recommendation of this practice.

The majority of pneumonics experience an evident relief after blood-letting, which, though momentary, doubtless causes a repetition—this relief, however, is only in the least important symptoms, such as the oppression at the chest, the difficulty of breathing, &c., whilst the essential symptoms do not diminish in intensity, in cases where the pneumonia is accompanied with hyperæmia. The symptoms of hyperæmia of the lungs, which are manifest by the extreme feebleness of the respiratory murmur, do not undergo any change. He who will persist to believe that blood-letting is serviceable, because it diminishes, if only for a short period, the dyspnœa, the oppression, the cough, &c., should reflect that the amendment of these secondary symptoms, and which are, probably, but the effects of the curative force of nature, is not so desirable as is supposed, since those pneumonics which are developed without marked symp-

toms, (excepting those of auscultation) have often a more fatal termination than those which arise in a more threatening manner. Blood-letting, moreover, produces an immediate fatal result, in the acute tubercular infiltration. What physician, then, will have the courage to sing the praises of blood-letting in pneumonias, which are developed in tubercled cough, in those of children, of old men, in those which accompany the abdominal typhus, delirium tremens, rubeola, cholera, &c. ? Are such pneumonias less intense, and of consequence, blood-letting less necessary ? He who believes that, without the abstraction of blood the patient would be suffocated, can practice one to ease his conscience—but he should not let escape the opportunity of acquiring more correct ideas on the pathological course of this disease. Another motive prevails over a great many physicians, in favour of blood-letting, viz. an ignorance of the progress made of late years in pathological anatomy. They still imagine that in pneumonia, the blood vessels of the lungs are swollen with blood, and that this is the cause of the disease, whilst pneumonia may arise equally well from anæmia, as from hyperæmia of the lungs.

For blood-letting to be useful in pneumonia, it ought to cause the absorption of the secretion, which is in the tissue of the lungs, and at the same time prevent a new deposit. That blood-letting accelerates the absorption, it would be difficult to prove by experience, since the auscultatory symptoms are the same after and before the emission of blood. That it prevents a new deposit is as difficult to prove as to deny. What, then, is the utility of blood-letting, since we cannot establish a diagnostic of pneumonia, till the inflammatory infiltration is formed—since, in many cases, subjective symptoms do not exist, and in other cases, there are no evident prodromes, and since in those, when the disease develops itself in force, the morbid product is already fully formed ?

It is manifest that the physician should pay particular attention to the period of the disease which he has to treat.

In the period of splenisation, *aconitum* is the remedy which we usually employ—it promptly suppresses the inflammation—experience will teach whether it will be equally efficacious, in those cases where splenisation is unaccompanied by fever. I do not believe that *aconitum* is restricted to the fever, and is without efficacy in the inflammatory engorgement, since I have had occasion to convince myself that it is useful, because it acts specifically on the parenchyma of the lungs, and that its action is powerfully sustained by its great influence on the arterial fluid. If the fever be the effect of the inflammatory engorgement, it is evident that the first will not diminish until the second does itself. For *aconitum* to cure, it must necessarily first put a stop to the engorgement. At what dose should it be administered? this must depend on the individual—all that we can say in general is, that the physician should avoid extremes, that is to say, not give too large, or too small a dose. I generally give the third dilution in drops.

After *aconitum*, *bryonia* is the most common remedy—it seems to result from a great many observations, that it is chiefly suitable when there is hyperæmia—we do not, however, know whether it has any effect in causing a cessation of the engorgement of the parenchyma—observations are too defective to come to a positive affirmation. I believe it to be more specific on the pleura than lung, and more suitable in those pneumonias where the leading symptoms are pleuritic—it deserves especial attention in those cases accompanying abdominal typhus—I can very easily believe that if administered too often, it will not sustain the reputation it enjoys. *Nux* should be preferred in many cases, and chiefly in those where there is bronchial catarrh—the happy effects of this remedy on the grippe (an affec-

tion bearing a greater analogy to pneumonia than we are willing to allow,) prove this. Patients who are forced to recline a long time, as from a fractured femur, contract a strong tendency to pneumonia, and sometimes even contract the disease—*nux* is preferable to all other remedies—it is indispensable in cases connected with delirium tremens, and it is not less indicated in those consequent on a cold, or a suppression of the hemorrhoidal flux—should the splenisation come on gradually, without fever or cough, in a word, without any of the notable accompaniments of the pulmonary affection, *nux* generally is called for.

Phosphorus is very useful after *aconitum* in those pneumonias which so frequently are found in consumptions, as also in those which are complicated with bronchitis—in this last case capsicum, mercurius, spongia, equally are serviceable.

Many diseases of the heart, and of the large vessels, are the causes of pneumonia, in which cannabis is a boasted remedy. Further observations will teach us whether the reputation is deserved. Should the cause be the sudden cessation of the menses, accompanied by an old catarrh, with a thick mucous expectoration, from the beginning, *pulsatilla* will most probably be useful, as well as in those cases which arise during measles.

Arnica is the specific when the cause is a mechanical lesion. We have many other remedies to employ in this disease, and yet notwithstanding our care and attention we cannot always prevent its running on to the second stage.

Should the disease be mistaken in the first stage, or should the physician not be called till the second stage, which is often the case, the opportunity of giving the remedies above mentioned, is less suitable—but it is prudent not to wait too long the effects of them, but at once to administer the energetic *sulphur*, if an amelioration does not soon manifest itself. I have

cured several serious cases of hepatization, with the tincture of this remedy, in the dose of a drop repeated even every hour, according to circumstances. I have seen it act instantaneously, though the patients had previously taken enormous doses of Allopathic drugs. It is our only expectation when the patient spits blood, when the constitution is scrofulous, when we have reason to suspect tubercles—in one word in desperate cases of hepatization. A violent fever, a severe dyspnœa, &c., yield much more promptly and more certainly in this stage, to *sulphur*, than to the deservedly boasted *aconite*. I cannot say whether the higher dilutions would be equally efficacious or more so—experience has taught me nothing on this point.

I have never been able to assure myself whether *nitrum*, which Allopathy employs so much, is really useful in hepatization, but I believe that we may expect much from *tartar emetic* in large doses, though I feel no disposition to have recourse to it, since *sulphur* is by much preferable. China may be advantageously given in pneumonias, treated by excessive blood-lettings, or characterized by bilious symptoms, consequent on hepatization of the right inferior lobe.

If, in some cases, a green, fœtid expectoration takes place, indicating a gangrene of the lungs, the appropriate remedy is *china*, or better still *arsenic*.

I here take the liberty to direct the attention of physicians to a remedy which has never yet been employed in the stage of hepatization, that I know of, though it has more intimate relation to the lungs than is supposed. I refer to *lachesis*.

In the stage of purulent infiltration, *rhus*, *belladonna*, *hyoscyamus*, *acid phosphor.*, have been highly spoken of. This use of these remedies is purely symptomatic, and though I wish not to deny that they diminish some of the symptoms which declare an affection of the sensitive sphere, I cannot believe that the

lungs filled with pus can be sensible to the action of medicines, and even supposing it to be true, it would not be to the action of these remedies, but to lachesis. The cures which I have obtained at this stage, I look upon as the work of nature and not the effect of my treatment.

The following observations are by Dr. Fleischmann, physician to the Homœopathic hospital at Vienna.

Formerly I used to administer the ordinary remedies, *aconit.*, *bryon.*, *cannabis*, &c., in inflammations of the lungs, and, I confess, without repenting of it; it is, nevertheless, certain that each one of these remedies is only suitable to certain particular cases, or to certain stages of the disease. I had then very often, besides the difficulty of discovering the suitable remedy in each case, which is not easy, the uncertainty of not exactly knowing, after the cure, what medicine had operated it. At present this is not the case. For eighteen months past I gave nothing but *phosphorus*, whatever the symptoms of the pneumonia may be, and I now consider it as a suitable specific—only we must not suppose that we must always cure, even when we find the specific to a disease. Many cases of syphilis in effect, fail under the use of mercury, intermittent fevers under cinchona, and sulphur does not always cure the itch—nevertheless every one concedes their specific natures. I have seen the most violent pneumonias, in individuals of temperaments and ages the most various, yield to this remedy alone, though nearly two thirds of the lung were already hepatized, as proved by the stethoscope. I give it dissolved in ether, after the mode of preparation recommended by Hahnemann. I only increase the quantity—I give it as follows. *R.* *phosphor.*, 3, 6, dilut., gutt., 4, 8, aq. distill., Unc., 2, 4, D. S.—each day 3, 6 table spoonfuls. Rarely I go to a lower dilution, or give it more frequently.

CASES OF PRACTICE.

BY HENRY D. PAINE, M. D.,

NEWBURGH.

The following cases, though not developing any new principles of practice, or even any new application of remedies, may be, nevertheless, not altogether uninteresting to the readers of the Examiner, as confirming the experience of others in the like cases.

AMBLYOPIA.—*Dimness of sight.*—In a case of this affection in a young lady, which had already resisted for several years a variety of remedies, and modes of treatment, and slowly but steadily increased in extent, I found *sulph.* and *puls.* of very essential service. The only symptoms observed were the following :

Cloudiness of vision in the left eye, increasing and diminishing at times, but without regularity ; aggravated by reading, brilliant light, and sedentary employment. At times, a sensation as if looking through a moving mist ; occasional flow of tears ; a dullness in the color of the cornea was evident, which at times seemed to pass over the whole organ, when the iris and pupil itself would be obscured. I could discover no constitutional symptoms, to assist in making a proper selection of a remedy, the patient being in other respects, with the exception of a costive habit, in good health, of a slender form, lymphatic temperament, and gentle, indolent disposition.

The administration *tri. sulph.*, at intervals of several days, was followed by a slight diminution of the difficulty. After a few doses of that remedy, I gave at intervals, *calcare carb.* *graphites*, *silic.* and *sepia*, without very evident results, except from the last, which, for a time, seemed to produce very considerable amelioration, but which ceased after two weeks. I then gave *pulsatilla*, 3d *gt. j.* every third day, and *tr. sulph.* once in two

weeks. In the course of six weeks, the symptoms gradually diminishing, I found the eye and the sight so much restored to its natural condition, as to feel little or no inconvenience, except from very brilliant light, or exposure in the wind. I advised a more active mode of life, and at the last accounts there was no increase of the disease.

CHRONIC CEPHALALGIA.—*Chronic Headache.*—In a case of several years standing, the following characteristics were observed. The attacks were generally sudden, though frequently preceded by dullness in the head and vertigo, on rising in the morning. The pain began sometimes on one side and sometimes on the other, but usually spread by degrees, over both sides, being most severe on the temples. The character of the pain was various at different times, pressing, burning, paroxysmal, or continued ; sometimes changing during the same attack from one place to another, always accompanied with nausea, and generally with vomiting, and followed by great debility. The attacks were experienced at regular intervals, on an average of once a week, but almost always at the menstrual periods, and then usually more severe. The attacks were more or less frequent, and severe also, according to the attention paid to diet, exercise, &c., but could not be prevented entirely, nor usually postponed longer than ten days or a fortnight. The patient, Miss — had resorted to every remedy and means of relief that had been prescribed by physicians, or recommended by friends, without relief, but rather the contrary. The attacks lasted from one to three days.

A dose of *sepia*, 3d, increased the interval in which it was given to a fortnight. I ordered a dose of the same every fourth day, during the intervals, and endeavoured to avert, or ameliorate the impending attacks by various remedies, changing from time to time. The intervals continued to increase in length, and

the attacks diminished in severity. The palliative remedies given previous, and during the attack did not appear to produce much alleviation, with the exception of pulsatilla, 1st, and that only partial. After treatment of ten weeks, an interval of three months occurred without an attack, and I have not since (six months) been called to prescribe, except on one occasion, in which an attack was brought on by gross error in diet, and which was promptly relieved by pulsatilla and nux vomica.

TINEA CAPITIS.—Scald Head.—In a case of this kind, which has recently come under my treatment, also, after the usual methods had been tried in vain, such speedy and complete relief was obtained from the use of viola tricolor, in alternation with graphites and hepar sulph., as entitles it to further attention.

The child was of a remarkably quiet and inactive disposition; had been a good deal sick, and was quite small and feeble for her age, (between four and five years); had small enlargements of the glands of the neck, which were sometimes painful and tender.

The Tinea developed itself by the appearance of small, irregularly scattered, eruptions, on the occiput, at first red, but soon pointing, and exuding a small quantity of yellowish and acid moisture. The itching so intolerable that the child would use its nails to such purpose, that the blood would follow at every stroke, and the whole surface would become a new and frightful sore. Until this healed there would be a partial relief, but this was soon superseded by a renewed attack, increasing in extent at each renewal.

I ordered hep. s. 3d, once in eight days, and during the intervals every two days, one dose of the following prescription. *Tinct. viol. tric. gtt. i.; Sach. Lact. Q. S. div. in pulv. viij.* I also allowed the part affected to be moistened once a day with a weak solution of two drops of the same in one ounce of water.

The good effects were apparent from the
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first, and have continued to the present time, (three months) although the remedies have been discontinued, except at long intervals, for six weeks. The disease has entirely disappeared from the head, and the hair, which had fallen out, has began to grow again. There remains still the swelling of the glands, and some other symptoms, which will require further attention.

LOBELIA INFLATA.

BY DR. ALPHONS NOACK,

OF LEIPZIG.

Lobelia has obtained a great reputation in the cure of *pure spasmodic asthma*, *Cullen's spasmodic asthma*, or *A. spasmodico flatulentum*, (*asthma nervosum seu spasticum*.) In this disease it is said to act like a charm, so that the patient is fully relieved in from ten to twenty minutes; and that the action of no other remedy is to be compared with that of lobelia. *Withlaw and Elliotson* speak of it as a perfectly specific remedy in pure asthma; and their experience is corroborated by that of many American, English, French, and some German physicians. *Barbon, Stewart, Randall, Bradsheet, Andrew, Forbes, Elliotson, Cutler, Bridault de Villiers, Behrend, Neumann*, and others concur in its recommendation. *Sigmond* noticed that after the first dose of the tincture, given in spasmodic asthma, the respiration became easy, and health was restored; also that it quickly brought on a mucous expectoration, which afforded great relief. According to *Neumann* this remedy, acts specifically upon that portion of the nervous system which presides over the actions of the respiratory muscles, and that it relieves spasmodic

motions of these muscles, with an almost inconceivable rapidity. But he only recommends it in asthma, without organic derangements. On the other hand *Elliotson* recommends it as the most excellent palliative means in pure spasmodic asthma, and even when organic affections of the lungs, heart or liver lie at the foundation of it. *Sigmond* states that it relieves the cough and oppression of consumptive patients. *Forbes* has found lobelia very serviceable in allaying the paroxysms of asthma, especially in *asthma spurium*, occasioned by dropsical accumulations in the chest, or by affections of the heart. *Bree*, who was asthmatic himself, found the curative action of lobelia substantiated in the most brilliant manner in his own case, which was one dependent upon a dropsical effusion. *Dr. Denoy*, who was also asthmatic, found instantaneous and permanent relief from the most violent paroxysms of asthma. *Elliotson* states that when asthma is complicated with bronchitis, the lobelia affords no relief; *Cartwright*, however, advises it in inflammations of the mucous membranes of the bronchia, and against catarrhal inflammations of the trachea and bronchia. *Neumann* recommends it as a most excellent remedy in the dry and excessive troublesome cough of phthisical patients, which arises from an insupportable tickling in the throat. It has also been urgently recommended in whooping cough. According to *Noack* we have a right to expect much from lobelia in all affections in which the *pneumo-gastric* nervous system is concerned. It deserves particular attention in neurosis of the nerves of the chest, especially in asthma convulsivum, A. psoricum Schönleini, A. senile et Millari, Tussis convulsiva, A. hysterium, (Hysteria laryngea, pulmonalis, strangulatio hysterica;) further in cardialgias, especially in cardialgia menstrualis, podagrica, potatorum. Also in inflammatory conditions of the mucous membranes of the throat, lar-

ynx and bronchia, hence in angina, in bronchitis acuta, and chronica, benigna and maligna. It is not improbable that it may prove a valuable palliative in phthisis pulmonalis. It remains to be tried in croup—several experiments seem to show that it may be given with benefit in dyspeptic affections.

MALFATTI'S OPINION

ON THE PRINCIPLE

SIMILIA SIMILIBUS, &C.

In the communications from the Society of Physicians to the Austrian Medical Journal, vol. 32, p. 3, we read, that *Malfatti*, an Allopathist, decides: "the principles *similia similibus* and *contraria contrariis curantur*, are only relative, that the one necessarily presupposes the other, and the one is nothing without the other. That it was not without cause that Hippocrates united these two principles in one term, *similia similibus*, *contraria contrariis curantur*. The main principle, which Hahnemann wished to confine to *similibus similia* exclusively, belongs neither to this nor to the other, but lies between both, in the centre, in which both unite and become one. In this centre, the great physician Hippocrates, placed the position of action, in like manner as the older philosophers here placed the abstraction of thought. The old Chinese school, however, expressed themselves more clearly on this point, when they placed [a principle, by them called *Tai-Kie*, in the centre, between the positive and negative, and recognized in it, the absolute thought, or the god-like understanding, and the general main principle of all things.

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DR. DUNNEL'S

ADOPTION OF HOMŒOPATHIA,

IN A LETTER ADDRESSED TO

JOHN F. GRAY, M. D.

DEAR SIR,

You desire me to give you my reasons for believing Homœopathia; you well know I ought to have good reasons for that belief; because no person entertains a more contemptible opinion of the science, than I once held.

Contempt arose in me from the same cause that produces the same opinion among the majority of physicians, viz. the most profound ignorance of the *facts* adduced in its support. The theory is so contrary to the ordinary doctrine inculcated in the medical schools, that I think few physicians, if any, will ever reason themselves into its belief; I surmise that most of them would, like myself, regard it as too despicable for serious investigation.

Thus, when urged by yourself and others, years ago, to examine the subject, I deemed it of too small import for serious examination, and went from year to year, groping along the dark and devious tracks of Allopathia.

In a series of seventeen years' practice, and a course of medical reading, as rigid as falls to the lot of most practitioners, I had often

regretted the insufficiency of the rules for treating many maladies, and had suspected disease was often a less fatal enemy to mankind than the doctor. I had been convinced that the most scientific modes of treating disease were wrong, because they were so often followed by disastrous results. I knew there were thousands of well attested facts, corroborative of empirical cures, that contradicted the *supposed* well founded doctrine of the schools, and that many of the most valuable modes of curing disease, were derived from empiricism alone, and dove-tailed into conjunction with the received doctrine, by means of the most blundering mechanism.

Little did I then dream, what I now know, that Homœopathia reconciles these apparent discrepancies, unravels the gordian knot, and expands the confused art into the precise science.

In the summer of 1840, I was accidentally called to visit a lady in post puerperal convulsions, during the absence of her physician, and after having carried bleeding, both local and general, cathartics, derivatives, &c., as far as the boldest would dare, without relief, I left her in the charge of her physician and two colleagues, in a situation I deemed almost desperate. Returning to the city two days after, I learned that she had recovered very speedily, after taking some medicine given her by one of the physicians. This physician I did not meet for some months afterwards, and this case becoming the subject of conversation, he avowed it

was a Homœopathic remedy, used on that occasion, that arrested the convulsions.

This physician expatiated so largely in favour of Homœopathia, and urged me so strenuously, to investigate the matter, that I *consented*. He placed the Organon in my hands, and gave me some medicine.

After perusing the introductory chapter, I began to devour the contents of that work with intense interest; for it recalled circumstances in the cure of disease I had in vain endeavoured to comprehend, and gave form, shape, and fashion to various doubts, and day dreams, that had often floated over my brain, without the possibility of assigning to them, "a local habitation and a name."

Years since, I was once mortified by witnessing an Ischuria renalis resist all my efforts, and two colleagues, with our antiphlogistics, sudorifics, diuretics, and narcotics, for twenty hours, and then yield to the prescription of a quack, in our absence, who gave the patient a few drops of tinct. canth. and spts. nit.

I had seen eight men, mortally scalded with steam, die with soothing and antiphlogistic treatment, except one, who was washed with rum, and fed upon it, until he was wild as a bedlamite.

I had witnessed a brother promptly cure cases of very serious cholera infantum, with pulvis antimonialis, and [colic and gripes in children with jalap and potass.

Anomalous facts of this nature, all practitioners meet with; and most of them, in time, become addicted to search after specifics.

Even the author of "Humbugs of New York, especially Homœopathia," cures, "*over two hundred cases of chorea Sancti Viti*" a disease, he says, consisting of a *mobility* of the nervous system, by arsenic, a remedy which, *I guess*, stiffens the nervous system.

The Homœopathic law reconciles a million of otherwise discordant facts, gathered by observation and experience, and combines them

into one harmonious whole. I was so forcibly struck with the truth of the remarks of Hahnemann, in his Organon, upon the discrepancies of medical testimony in various ages and countries, that I determined to test his view practically.

I had been three weeks suffering from a rheumatic stiffness of my back and arms, that prevented motion without pain, especially in rising from bed or a seat. I dropped a single drop of Bry. 1, in a wine glass of water, and took two teaspoons of the solution that evening. The next morning I arose from bed, forgetful of the pain I had previously suffered, until I noticed the wine glass and spoon; two or three times that day I felt as if the pains were returning, they lasted but a moment or two, then fled, and have never since returned. This might have been accidental, I have driven them away before with tinct. colch., but not so rapidly, so pleasantly, so permanently.

A few days afterwards, a ship master, who had previously consulted me upon an ischuria, which often seized him, and for which, a brother, who was a physician at the south, had, tried many remedies in vain, sent for me, on account of a pain in the loins, extending along the iliac ridge to the glans penis, and testicle, with dysuria, tenesmus, nausea, and vomiting. He had been two hours suffering, had tried the warm bath and was desirous of being bled. I did not know which was the best remedy, and used tinct. canth. cann. and bell. a drop of the first attenuation of each, in a cup of water, of which I gave a teaspoonful of each alternating, every five minutes. In less than half an hour, he experienced great relief, and was persuaded to lie down. I was then under the necessity of leaving him, with strict orders to take no more medicine, if he remained easier.

When I returned two hours afterward, I learned he had fallen asleep soon after I left; in a short time awoke, he urinated freely, the

pain and agony were gone; he declared I must have given him something very powerful, for he had never experienced so severe an attack, and had never before been delivered in less than twenty-four hours. He was astonished; and so was I.

The same day, a neighbour returned from the country, with an inflammatory rheumatic swelling of the right wrist and left ankle. It had been so severe for six previous days, that he had had no rest day or night. I gave him a solution of Acon. 1, several times that day, the next day he was quite free of pain, and in about three days time, Bry. 1, in two or three doses cured him of all the swelling and lameness.

A parturient female, on the third day after accouchement, was seized with chills and fever, abdominal tenderness, and the usual phenomena of puerperal peritonitis; three doses of Acon., and followed with a few doses of Bry., removed all vestige of disease in forty-eight hours.

These were cases in which fancy or imagination could have no instrumentality, the patients had no conception of what medicine they had taken, and Homœopathia began to rise in my esteem. The promptitude with which cholera infantum yielded to the remedies, astonished myself, and the friends of the young sufferers.

A reforming inebriate, having been wet, was attacked with vomiting and purging of a most rapid nature, and after four hours of suffering, I found him without a pulse at the wrist, covered with a cold sweat, and cramped over his whole body, with involuntary evacuations. The prostration was so extreme, and his habits so bad, that I expressed great doubts of a favourable termination. I gave him minute doses of nux and verat. in alternation, every five minutes. In about half an hour, I left him somewhat relieved, with directions that if he should not be better in fifteen minutes, he should have some laudanum. It was not given,

and the next morning I found him in a very comfortable condition, and a dose of Ars. 4, that day, cured him.

I had been advised by a medical friend, not to attempt the treatment of any chronic case under six months' study. I could not wait, but commenced with an old woman of sixty-five years, who, having fallen into a cellar the previous winter, and injured her loins and limbs, had been unable to earn her living for six months past. I gave her a single dose of Arsenic 1, and in one week's time she came to me to express her astonishment, that the medicine had entirely taken away her lameness.

I had a light haired scrofulous girl of four years old under treatment, for conjunctival and tarsal inflammation, upwards of eight months, after having been previously treated by a physician for a year. I had in vain attempted to cure it with various astringent lotions, and the use of counter-irritants joined to alteratives. I determined to use no local application, and try the virtues of Homœopathia. The child's eyes became perfectly well in five weeks' time, and remain so to this day, by the sole use of lycop. sepia, calcarea and sulphur, in infinitesimal doses.

A female, aged 38, after a second accouchement, had suffered eight years with rheumatism, dysmenorrhœa, dyspepsia, leucorrhœa, most profuse and acrid, was pale, emaciated, and so sensitive, as scarce to dare breathe the open air; three able physicians had tried their skill in vain, before I became acquainted with her, and I had prescribed for her the previous summer and winter without any decided benefit. About this time I was called to see her, suffering an unusually severe menstrual colic. I then commenced Homœopathic treatment, and in three months' time she was in better health than she had been any time in eight years previously, and is now free of all vestige of her former ills.

A case of constipation in a man, attended

with headache, giddiness, lassitude, eructation, and vomiting of food soon after eating, without nausea, a livid hue of countenance, spasmodic contraction of the abdomen, and other minor symptoms, had been eight months under my Allopathic treatment, without success, and it yielded *readily* and *permanently* to two or three drops of the third dilution of Plumbum.

A female had been six months under constant painful micturition, metrorrhagia, cephalalgia, vertigo, and violent wandering pains in different parts of the body. Two different physicians had treated her for stone, prolapsus uteri, gastro enterite, &c. No relief followed their most heroic remedies; they had not seen her in a month, her situation being much the same as when they saw her. She was cured in one week, with two or three infinitesimal doses of canth. cann. and bell.

These are but a few of the cases in which I first essayed Homœopathia. I had tested it in two cases of croup, with a success exceeding my most sanguine expectations. I had, of course, very speedily substituted Homœopathia for Allopathia, in my daily practice. I could not avoid speaking very favourably of it before my medical brethren, and it was, as usual, met with, an examination? an investigation? oh no, by no means, this would be too laborious a mode of disproving it. It was met with laughter and ridicule, and ere long I was waited upon by one of them, with a challenge, to try my little doses upon a case of Traumatic Tetanus.

The physician candidly acknowledged his distrust of Allopathia, which had failed him in all the cases he had witnessed. The patient, a female, aged fourteen, had been wounded twelve days previously, in the bottom of the left foot, by a broken bottle, and was then labouring under the most positive evidences of Tetanus. It became in twenty-four hours' time, one of the most frightful cases of opis-

thotonos, and was witnessed by Drs. Benjamin Bailey, Theodore Cornel, and Alfred Freeman, who can testify as to the character of the disease.

The patient had taken no medicine, but a little sulph. magn. the previous day, and, in that condition was submitted to my prescriptions. I used upon her Homœopathic remedies solely, of the high attenuations, because I had already tested their power over cramps and convulsions. It was a desperate struggle, but Homœopathia again triumphed. The patient was restored to perfect health, and remains so to this day, (eight months.)

If any thing had been wanting to convince me of the superiority of Homœopathy, the result of this case would have supplied the deficiency.

Two short months of examination into the truth or falsity of the law of *similia similibus curantur*, had resulted in effectually curing more diseases than I had been able to do in as many years.

The truth of the law flashed over my mental vision, with a light, brilliant and intense as the sun at noon day, and in the centre of its effulgence, appeared the venerable features of the sage of Meissen, Hahnemann! a name destined to outlive the names of those medical predecessors whom he has not embalmed in his own immortal works.

It has, I assure you, cost me quite a struggle to believe my long imbibed and cherished ideas of disease erroneous; especially as regards inflammation. I have watched the patients I have treated, with inflammatory diseases, as closely as the pilot watches the breakers under his lee, and stood ready to draw the lancet in their aid, if necessity required it, until I have verified in numerous instances the truth, to the very letter, of that portion of the oracles of the immortal modern Æsculapius, which says, that "the inflamed blood is nothing more than the product of the

acute fever, the inflammatory immaterial (dynamic) irritation; and this latter, the sole cause of the disturbance that has taken place in the vascular system, may be arrested by a Homœopathic remedy, such for example, as a globule of sugar, impregnated with the juice of aconite of the decillionth degree of dilution, avoiding the vegetable acids; so that the *most violent pleuritic fever*, with all its attendant alarming symptoms, is cured in the space of *twenty-four hours at farthest, without loss of blood, or any antiphlogistic whatever.*"

I have only to add that my first few months of experience have been confirmed, and my conviction daily and hourly increased ever since. That the *only true way* to cure disease agreeably to the maxim of Celsus, *tuto, cito et jucunde*, is to treat *similia similibus*.

I am truly yours.

COMMENTARIES ON THE

JOURNAL DE LA MEDECINE HAHNEMANNIENNE,

BY C. CROSERIO, M. D.

OF PARIS.

[We hail with proud satisfaction the name of the venerable Croserio, as one of the voluntary contributors to our Examiner. We are indebted for this service to our friend, Dr. Neidhard, of Philadelphia, who has furnished us with the manuscript of the following criticisms, direct from the French capital. Dr. Croserio, who is a sincere and zealous advocate of the Homœopathic doctrine, has made an elaborate analysis of the above interesting Journal, published in Paris, by Dr. Molin; and as the result of his labours, the reader has now presented to him a lucid summary of this

publication, for one year, comprising a series of pertinent and stringent criticisms on the theoretical, and a rich and instructive fund of the practical.

To our American friends, unacquainted with our author's reputation, we beg leave to say, that Dr. Croserio has been distinguished alike as Allopathist and Homœopathist, for his scientific attainments and practical acumen, has been complimented by honorary distinctions, and is, at present, physician to the Sardinian Embassy, and President of the Parisian Homœopathic Society.—ED.]

No. 1. January, p. 1. Introduction. The author justifies his choice of title by telling us that his Journal is intended to defend that system of which Hahnemann is the author. He also avows it to be his aim to propagate *true Homœopathia*, among his Allopathic colleagues, and professes a just and deserved contempt for those who do not hesitate to practice it with sordid and selfish views, and without being convinced of its truth.

He promises, finally, to publish every month five sheets of his "Journal de la Médecine," etc. etc.

P. 11. Clinical medicine by Dr. Chargé, physician to the Hotel Dieu, Marseilles. Case of a *Caries vertebralis*, and of the great trochanter, in a child of ten years, maltreated unsuccessfully, for eighteen months, by all the barbarous means of the old school, leeches, cups, vesicatories, baths, antiscorbutic syrups, &c. &c. The patient was in a state of perfect atrophy, and appeared unable to survive much longer. Diarrhœa, colliquative sweats, hectic fever, &c., had already made their appearance. Silicea, diluted with water, taken in doses of a table spoonful every morning, effected within sixty days a complete cure.

P. 29. A case, communicated by Dr. Leon Simon. This case was one of *Pleuritis* treated for the first two days with *aconite* and *bryonia*.

On the third day he abandoned Homœopathic treatment for that of an Allopathic practitioner, who treated him for two days, *lege artis*, viz. with repeated venesections, laudanum, china, when the patient died.

P. 44. Analysis of the "New Organon of Specific Medicine, by Dr. Rau," by Dr. Molin. The author points out several of the numerous contradictions, embodied in this work, and justly reproaches the author with his ill feelings against Hahnemann.

P. 62. Speech of the Deputy Wolf, as delivered in the lower house of Baden, 1839, in which he demands the maintenance of the law of 1833, which authorizes the liberal, gratuitous dispensation of Homœopathic medicines, by the Homœopathic physicians.

Part 2. February, p. 8. Several cures with Aurum, communicated by Dr. Gastier, physician to the hospital of Thoissy. There is every where, he remarks, a class of people, the strange pretensions of whom contrast singularly with the opinion the public entertains of them. You may hear them talk with an assurance, generally very little justified, on scientific questions, concerning which one might be inclined to deny them the possession of intellect. These are the men called strong minds. I am acquainted with a lady of much wit, who denominates them restive minds, and who compares the ridiculous superiority to which they pretend or aspire, to that of a capricious, and obstinate animal. This comparison, which may at first appear strange, does not always lack analogy. A "strong mind" is very often remarkable for nothing but stupid obstinacy, or an inconsistency, difficult to comprehend, in consequence of which, on the broadest and most commodious road, where every body else moves without restraint, he creates obstacles for himself, and much sooner makes a retrograde than a progressive movement, although it is impossible to perceive in his resistance to the spirit of the times

any thing explanatory of his motives for doing so. A "strong mind" will tell you that it is not sufficient that a road be wide, open to all, and cleared of all obstacles, in order to afford a secure ground for walking, but that it is also necessary to know, *how* to walk on it, that we must have a knowledge of the ground, on which we put our feet, that we must be assured that we do not meet with some unforeseen obstacle on it. In a word, always in opposition to every creed which seems by general concurrence to be impressed with the seal of immutability. You may see him affect the same aversion to every opinion, which has a progressive tendency, or gains advocates, and all this he does, not because he thinks those systems or opinions objectionable in themselves, but because they are taken in favour, and possess friends. As soon as he finds himself pushed hard, and feels himself beaten on all points by the inexorable logic of facts, or by reasons which are the immediate deductions therefrom, he protects himself by denying what he has seen, or by doubting what actually exists, preferring an obdurate immobility, to following the footsteps of others, or advancement in their company. And of such men we have to bear the contempt, and obey the laws made by them?

The author continues his cutting remarks, applying them more directly to our adversaries.

After concluding these introductory remarks, he communicates his observations on the effects of Gold (Aurum).

Case 1. A certain physician, a shame to his profession, and a scourge of human society, when called to a patient suffering under strangulated *Hernia*, endeavoured fruitlessly by every forcible means to reduce it, after which he made use of leeches, cataplasms and diet, and then with a seemingly easy conscience, awaited the slowly approaching death of the patient, to tell afterwards the

friends of the latter, that he died with a necessarily fatal disease. Such is commonly the excuse of these delinquent physicians. The piercing and continued cries, however, of the patient, and his excessive suffering, decided his friends to call in another physician. The latter advised an immediate operation. The first physician, however, being opposed to the operation, Dr. Gastier was called in as a *third* consulting physician. Dr. Gastier arrived there at eight o'clock in the morning. The patient was a female, 53 years of age, of a lymphatic temperament, who had been taken four days ago without any assignable cause, with vomiting, coincident with the appearance of a hernial tumour, under the inguinal ring of the right side. The matter vomited consisted at first of food, and mucous and bilious secretions, but for the last twenty-four hours contained nothing but the excremental produce of digestion. The patient had no evacuation for six days, the abdomen was slightly distended, and generally painful, particularly so around the strangulation, where she could scarcely bear the touch of the fingers—excessive thirst, pulse small and frequent. Before proceeding, as a last resort, to the operation, Dr. G. proposed to his colleagues to try first some less heroic means. They agreeing to it, he administered *Nux vomica* in a dilution of water, taken in a table spoonful at a time. After the third spoonful the vomiting ceased, the hernia apparently remaining the same. The patient was more comfortable, but the pulse and the pain in the abdomen nearly the same. He now orders the patient to take some beef broth, containing some barley. He now gave a dose of *aurum*, diluted in water. Six hours after taking the first dose a turbulent borborygmus accompanied with great anxiety, appeared. She at the same time experienced a renewed inclination to vomit. At six o'clock in the evening the patient appeared so bad that the friends thought it necessary to

call in a priest. During the prayers of the latter, they heard a gurgling noise, loud enough to be heard amid the prayers, which was the precursor to the spontaneous re-entry of the hernia, and the calm succeeding it. During the night she was quiet and comfortable. The patient continued convalescent, with the exception of an irritation of the digestive organs consequent upon the strangulation, and against which I effectually used several more specific means.

Case 2. A robust labourer, aged 48, had for seven months, an *Inguinal hernia*, for the origin of which he could not account, and which did not cause him any inconvenience except some fatiguing pressure. He was at the same time low spirited and restless. Under the use of *Aurum* the hernia disappeared, never to return.

Case 3. Was that of a nursing infant. The disease was that of a hernia, which disappeared in a few days under the influence of *Aurum*.

Case 4. A young man 18 years of age, of a sanguine temperament, was for five years troubled with horrible palpitations of the heart, which had resisted all means, even the treatment of the chief Surgeon of the Hospital Hotel Dieu, in Lyons. The patient was completely discouraged, very irritable, and inclined to commit suicide. Dr. G. prescribed *Aurum* diluted in water. On the fifth day, under a continued treatment with this drug, such an exacerbation of all the symptoms had taken place, that Dr. G. saw himself compelled to discontinue the use of *Aurum*. This change in the treatment, was followed by a corresponding one in the state of the patient. The palpitation of the heart ceased, as likewise the other symptoms, and the patient has ever since been perfectly well. (I think that in spite of this fortunate result, Dr. G. is to blame for causing an exacerbation in the patient's state, which it might have been

difficult, if not impossible, to overcome.—(Cros.)

Case 5. A lady, fifty-five years of age, of a bilious nervous temperament, during her life much afflicted with care and grief, was one day attacked with anxiety, and frightful agitation. She ordered her chambermaid to close all the doors, in order to exclude every visitor, and to take care of her children. She could not remain in one place, and was in a continued state of anxiety. When Dr. G. was consulted he prescribed *Aurum*. The effect was almost instantaneous, a few moments after having taken the medicine, the patient said she had had a sensation as if a veil were taken from her brain, a perfect command of her reason returned. The convalescence was complete, without there being a necessity of using any more active means.

Case 6. A shoemaker, in consequence of several gonorrhœas, which undoubtedly had been treated mercurially, was attacked by a kind of scirrhus on the left testicle. This disease he bore for fourteen years without suffering, otherwise than by the weight and volume of the tumour, which he was obliged to support by a bandage. The form of the testicle was oval, and was four inches long, and five in circumference. For several months the tumour had sensibly increased in size, accompanied by very acute and lancinating pains. The patient began at the same time to be depressed in spirits, very irritable, and disgusted with life. After a Homœopathic treatment of two months the Doctor gave *Aurum*. Five days afterwards the right testicle had attained the size of the left, the patient all the time suffering most intensely. But in the same degrees in which his physical state appeared to become aggravated, that of his mind seemed to ameliorate.

Under the continued influence of *Aurum*, the two testicles, in the course of a few weeks were reduced to their normal size, and the dis-

eased one had even become smaller than the other.

The author concludes with some remarks, expressing his conviction of the importance of a due regard to the mental state of the patient. We heartily approve of the author's remarks, and we would beg our colleagues to direct their attention towards the same subject.

P. 115. *Course of lectures on Homœopathic Medicine, delivered at Paris, by Dr. Leon Simon*. Introductory Lecture. This is an exposé of the plan, which the author intends to adopt in the following course.

P. 126. Dr. Molin on Phthisis pulmonalis. "I have," says the author, "treated twenty-two phthisical patients, fourteen females, and eight males, seven between the ages of sixteen and twenty, thirteen under thirty, and two above that age. Of these twenty-two fourteen died or abandoned Homœopathic treatment, without having improved, five were relieved more or less, and three were apparently cured. It is the author's intention to direct, by the communication of these cases, the attention of his colleagues to the efficacy of *Ammon. Carb.* and *Conium* in the treatment of these diseases, and to caution them against the dangerous consequences attending the use of sulphur in Phthisis.

Case 1. M^{lle} Francaise R. aged seventeen, slender, of a lymphatic temperament, white rosy skin, of a subdued, timid character, inclined to cough, &c., &c., menstruated at fourteen; three months afterwards, without any assignable cause the menses disappeared. Four weeks after this suppression, which had, meanwhile, been treated with Iron and leeches, etc., the patient commenced coughing. The cough was trifling at first, and very little attention was paid to it; insensibly it increased. The cough was brought on by a tickling in the throat. This was accompanied by some difficulty in breathing, when mounting the stairs, or walking quickly. When I saw the patient

on the 17th of March, 1839, she had had, a few days before, a violent hæmoptysis, which had recurred three times in two days. The expectoration was white, mucous, but showed no trace of blood; percussion and auscultation did not show any thing abnormal. But the difficulty of breathing, the dry cough, the heat of the skin, particularly of the hands, which recurred regularly every evening, left me no doubt as to the existence of tubercles in the lungs. I was confirmed in this opinion by the fate of the parents. The Doctor gave *Sulphur*, diluted in water, and given every morning. Under its influence the cough and the febrile symptoms increased, and there was pus in the matter expectorated. Sulphur was discontinued, and in its place was given phosphorus, which diminished the cough and fever, but the difficulty of respiration remained. At the beginning of May the Doctor administered Ammon. carb. At the end of eight days a remarkable improvement had taken place, which was preceded by a more abundant expectoration, containing large knots of tuberculous matter. At this time there might be heard, at the summit of the left lung, a pretty loud resonance of the voice, some rattling of mucus, and below the respiration was feeble. All this decreased, and at the end of a month the patient had regained strength and even some embonpoint. The digestion went on regularly, the menses had returned, even somewhat abundantly, the cough was considerably diminished, as likewise the difficulty in the respiration.

P. 142. Conclusion of the address of Deputy Wolf.

P. 154. On Venereal diseases. Communicated by Dr. Laburth. Rocheford, a hussar in the 4th squadron, of a nervous constitution, has been for eighteen months affected with a venereal disorder, for which he has undergone tedious and fruitless Allopathic treatment. For the last seven months he was at the Hospital

"La Charité," but seeing that he derived no benefit from it, he asked for leave to join his corps.

On November 13, 1835, the day after he had joined his regiment, R. entered the infirmary, and presented the following symptoms.

Schirrous tumours in the glands of the groin of the left side: a fistulous spot in the right groin, the skin which covers it, scales off in flakes, and is red like the dregs of wine, bloody and serous suppuration when at rest.

The patient has no pains, but it is impossible for him to walk.

The Homœopathic physician was determined by these symptoms to administer antidotes against the mercury. Several doses of Aurum, one of Nitric Acid, and one of Hepar Sulphuris, were sufficient to produce cicatrization of the sore, the latter having been enlarged, previously removing the skin, under which the pus was.

The patient returned to his regiment in perfect health, after a sojourn of six weeks in the infirmary, and on the 37th day of his treatment.

The first medicine I administered, is perhaps disapproved of by my readers, if we have regard to the observations of older practitioners, and particularly to what Hahnemann says with regard to the effects of Mercury, and its mode of preparation, in vol. iii. of his *Materia Medica*. We cannot help, however, to pay a due regard to our own individual experience. What induced me to employ Aurum was the fact of having cured a similar case, whilst having charge of a military hospital for venereal patients, in Versailles, containing two hundred patients. The case in question was that of a young soldier, who at that time had been for the first time affected with syphilis, and whom an Allopathic treatment of longer than a year could not relieve.

Case 1. *Chronic Syphilis*. On the 17th of

November, 1835, a hussar of the fifth squadron, left the Hospital de la Charité, where for the last four months he had been subjected to mercurial treatment, for a venereal disease. On the 20th of the same month he entered the infirmary, and presented the following symptoms.

A fistulous sore emitting a bloody suppuration, the skin, which covers an engorgement of the left groin, scaling off in flakes. The general state of health of the patient, has greatly suffered in consequence of a prolonged stay in a room filled with sick, where the temperature was high, the air vitiated and rarely renewed, and last though not least, by abuse of Mercury.

The sore is properly treated, dry lint, and a compress is put on twice a day, the whole kept in its place by a triangular bandage. In this case, as in the preceding, we decided upon Aurum. Its use effected three quarters of the cure, Acid. Nitr. and Hepar Sulph. completed it. The period elapsed from the beginning of the cure to its end was forty-one days. The patient thus re-entered his regiment after having spent five months and a half in the Hospital de la Charité, and in the infirmary of the regiment.

No. 3. March, 1840, p. 161. Studies on Materia Medica, or thoughts on the means by which to determine the distinct and diagnostic character of Homœopathic medicines. By G. H. G. Jahr.

Introduction. How Materia Medica ought to be studied. The author nearly repeats the interesting article of Dr. Constantine Hering on this subject, with which the latter introduces his admirable treatise on the poison of snakes. M. Jahr promises to continue his researches, and to publish them successively in the Journal.

P. 195. Clinical observations by Dr. Petroz.

Dr. P. was in the night of January 1, 1838, called to see a little girl, seven years of age, in

the forty-fifth day of her sickness. In the course of a scarlatina which had appeared rather sparingly, perhaps not sufficiently, she had been treated with purgatives, which were followed by an intermittent, which returned irregularly, and to which succeeded symptoms of a typhoid fever. The chief agents employed against the latter were leeches applied to the abdomen, baths, and acidulated potions. For three weeks the patient had been dumb, unable to speak, and appeared to be deprived of sight, the delirium had not been interrupted during six days, the right extremities were in a state of paralysis, completely insensible. The entire left cheek was occupied by a tumour, the elevated point of which consisted of a large gangrenous sore, its base was of a violet-coloured redness; the rest of the face was extremely pale and cold, like the body, the head was very much swollen, the pulse frequent and very feeble, disappearing under the slightest touch, the respiration was slow and short, the stomach rejected everything introduced into it, breath of a fœtid smell. The prognosis was necessarily disheartening; to satisfy his conscience, however, the doctor, in order to arrest the progress of the gangrene, prescribed Guarea dissolved in water, every hour a spoonful of the mixture. The next day the tumour was less hard, showing already a line of demarcation, limiting the extent of the morbid part, the vomiting occurred less frequently, a few table spoonfuls of beef broth at long intervals (one at a time) were retained, the other symptoms remained the same, the medicine was repeated every three hours. On the third of January the tumour had sunk, the vomiting had ceased, the pulse was less feeble, the skin became warmer, broth and a mixture of wine with water, were continued as a drink. On the 4th of January, continued amelioration of the patient, sensible proofs of the action of the medicine; it is therefore discontinued. January 6.

Abundant suppuration around the sore, in the exterior and the mouth of it, the child recovers her sight, and recognizes her mother. January 7. Rapid progress in the suppuration; it is very copious and of a sanious nature; it was unfortunately found impossible to prevent that part of the discharges, emitted from the internal extremity of the opening, from entering the stomach, causing efforts to vomit, colic pains, inflation of the abdomen. These symptoms were combated by Chamomilla, diluted with water, a table spoon of the mixture every half hour. On the next day (the 9th) these symptoms abated and finally ceased, after two liquid stools having taken place in the course of the day. January 12. The eschar, which, by means of lint, has been almost completely separated, exposes the two rows of the teeth to the view, the opening being somewhat more than an inch in diameter. The borders of the sore immediately deterge, the strength of the patient increases, she recovers the use of her senses, by degrees the sensibility and the power of moving reappeared in the right side, every thing appeared to indicate the approach of a cure, when unexpectedly, on the first day after the falling off of the eschar, all these advantages seemed to be lost. The pulse became again slow and feeble, the general warmth diminished and even became extinct, the face assumed an extreme degree of paleness, the stomach again rejected every thing liquid, the matter vomited had a foetid smell, the tongue was white and dry around the edges, and at its base covered with a mucous coat of a brownish colour, the edges of the sore became very painful, and were of a brown and dirty colour. This formidable state was undoubtedly the consequence of an infection brought about by an injection of the pus and its reabsorption. Arsenicum diluted with water and given in doses of a table spoonful every hour arrested the progress of the disease, the vomiting

ceased after twenty-four hours, the use of the broth could be resumed, and the strength and general warmth soon re-appeared. The medicine was continued at longer intervals. In spite of the promptitude with which the formidable symptoms had been arrested, the ravages of the sore consequent upon it, were very serious, it had enlarged by the continued gangrene; a portion of the upper maxillary bone became detached at the end of six days. But from this time the sore rapidly progressed in its cicatrization, without making it necessary to resort to another medicine.

The author promises to communicate to the profession his pathogenesis of Guarea, as soon as he shall have completed his experiments. We desire greatly to see this publication, which will make us acquainted with the effects of a medicine, which, on such a terrible disease, produces such striking effects. Dr. Petroz says that Guarea is indicated in every case of gangrene, which may be called acute.

P. 201. *Nux Moschata*—Translated from the German of Dr. Helbig.

Dr. Molin follows up this translation with clinical remarks, and adds that it is indicated in hysterical difficulties, and that Hahnemann does not hesitate to place it almost on an equality with Sulphur, on account of its frequent utility.

A woman aged 39, of a decidedly nervous temperament, of a good constitution, but which she constantly abused by excessive labour, was for the last eighteen months troubled with a nervous irritation in the œsophagus. Among the different symptoms, which this disease presented was that of an enormous inflation of the abdomen and the stomach, which appeared regularly after dinner, and the most trifling chagrin.

GLEANINGS—NO. IX.

1. LÖSEKE, (see *Mat. Med.*, 6th edit. p. 136,) says, if *Aloe* be given when the hemorrhoidal flow is suppressed, it will bring on the flow; but if it be given during the hemorrhoidal flow, it will check it. He makes the same remark with regard to the menstrual flow.

2. NIBMER says that *Gum Ammoniac* causes weakness of digestion, and immediately afterwards recommends it as a *STOMACHICUM*. J. N. SCHWARGE recommends it in *Amaurosis*, and at the same time quotes WICHMANN, who states that it produces dimness of vision and blindness.

3. *Ammonium Carbonicum*, according to SACHS, (*Manual of the Materia Medica*, vol. 1, 277 & 279,) produces "irritation in the peripheral nervous expansions, especially those of the ganglionic and spinal nervous systems, and the irritable tissues which have connection with them; it also causes nervous irritability, increased vosity, dissolution and decomposition with tendency to atony, colliquation and paralysis"—and then proceeds to state that it has proved efficacious in hysteria and hypochondria, in nervous asthenic diseases, in nervous fever with affection of the chest, in delirium tremens, cardialgia, &c., all of which diseases are characterized by the presence of increased nervous irritability: also in gout, apoplexy and malignant intermittent fever, in all of which increased vosity is present; also in scrofula, in exanthematic diseases attended with torpor and colliquation, in the colliquative sweats in the last stage of consumption, in atony of the uropoetic system, in diabetes, in chronic catarrh, dropsical swellings, especially of the scrotum and lower extremities, in dropsy of joints, in extravasations and exsudations, in malignant scarlet fever with ten-

dency to gangrene, in putrid small pox, acute gangrene, putrid fever, last stage of typhus, all of which are characterized by colliquation, dissolution or decomposition; and finally in paralysis. After this enumeration, Sachs naively adds, that he is "unable to give any scientific exposition why Ammon. Carb. cures diseases so similar to those it produces, and that hence nothing else remains but to administer it in those diseases in which it is empirically and satisfactorily known to be efficacious, while we at the same time recognize a scientific (i. e. university-theoretical) contradiction of its efficacy."

N. B. It is remarkable that Ammonium should prove efficacious in gangrene, and that a copious discharge of Ammonium takes place from gangrenous and carcinomatous ulcers; further, that it plays a great role in diseases of the vegetative sexual sphere of the female organism, and that during menstruation the perspiration is surcharged with Ammonium; and that Ammonium should prove curative in cases of poisoning with mushrooms and mushrooms themselves are characterized by the great quantity of Ammonium which they contain. It is well known that a similar analogy exists between the Itch and Sulphur, inasmuch as the Itch eruption is characterized by a remarkably sulphurous smell, and that Sulphur is the specific against the Itch.

4. According to SACHS, *Ammonium Muraticum* causes "increased secretion of mucus, relaxation of the muscular coat of the intestines, general depression of the muscular system, irritation of the spinal marrow, &c., &c., and still recommends it in *status pituitosus* characterized by Anorexia, insipid taste, slimy coated tongue, constipation or slimy diarrhoea, occurring in mucous, saburral or gastric fevers; also in inflammations of the mucous tissues, catarrh attended with swelling of the nose and discharge of an acrid and putrid smelling fluid; in inflammations of the œsophagus, trachea,

rectum and urethra, in phthisis pituitosa intestinalis, blennorrhœa of the bladder and urethra, fluor albus, laryngitis, bronchitis and croup, (dissections in cases of poisoning with this remedy, show that it causes inflammation of the posterior surface of the epiglottis, and of the vocal chords, the whole of the trachea and bronchia, all of which are more or less covered with a false membrane,) in phthisis pituitosa pulmonum, in hysteria and hypochondria connected with excessive mucous secretion in the *primæ viæ*, gout, when attended with a status pituitosus, &c., &c., all of which are characterized by an increased secretion of mucus.

5. The *confectio anacardina sen sapientium* was long celebrated as an excellent remedy against weakness of understanding, memory, and of the senses, but R. A. VOGEL says, (see Hist. Mat. Med., p. 276,) Casp. Hoffmannus confectionem hanc (sc. anacardinum s. sapientium,) confectionem stultorum dixit, quoniam multis INCONSULTO CREBROQUE utentibus memoriam abstulit eosque furiosos reddidit. Thus the inconsiderate and excessive use occasioned the injurious effects caused by Anacardium; while, properly used, it proved beneficial.

6. "*Antimonium Crudum*," according to SACHS, "excites the organic nerves and capillary vessels to increased activity, whence profuse secretion from the internal and external surfaces, viz.: copious perspiration, and profuse serous and mucous secretion from the bronchial and alimentary canals arise," and forthwith proceeds to recommend it in "inflammations of the internal mucous membranes, in profuse mucous secretions, in marked *status gastricus*, in epilepsy, when the skin is covered during a paroxysm with a general, profuse and fœtid sweat, in dropsy, in diseases attended with profuse sweat, in intermittent fevers when attended with gastric derangement and a mucous condition of the stomach

and bowels, in catarrhal fevers, chronic gastric affections, blennorrhœa of the intestines, fluor albus, *catarrhus pulmonum* and suffocations, croup, mucous asthma, &c., &c., all of which diseases are characterized either by the presence of copious perspiration, or by profuse serous or mucous secretion.

According to old school writers, *Antimonium* is a strangely acting remedy—now considered as an antiphlogistic, then as antispasmodic and calming, or skin-irritating, mucus-exciting remedy; while now we are advised to administer it with caution, as it is apt to excite twitchings, convulsions, or even epileptic fits; then, that we shall not give it in inflammatory diseases, because it is a heating, and an inflammation-exciting remedy—or finally are advised to give it in mucous-diseases in order to check the profuse mucous secretion. Again, G. A. RICHTER, (see *Arzneimittellehre*, vol. 5, p. 115,) tells us, that "*Antimonium* is used principally in mucous and bilious fevers, while it is well known to excite the mucous and bilious secretions, and thus, if given too frequently or in too large a dose, it will certainly protract instead of shortening the course of the disease."

In a preceding "Gleaning" we have alluded to the fact that Antimony is looked upon by many physicians as specific in many cases of inflammation of the lungs, while other, and no less eminent physicians assert that it causes inflammation of the lungs. In further proof of the latter fact, we cite the following passage from PARACELSUS, (see page 647,) "the poison of *Antimonium* causes a dry, harsh cough, stitches in the side, difficult respiration, foul breath, and profuse mucous secretion, it corrodes the lungs, and renders the urine acrid."

7. "*Antimonium Tartaricum*," according to ORFILA, "causes induration of the *dura mater* and strong adhesion of it to the skull, also untransparency and thickening of the *Arachnoidea* with redening and inflammation of the same,

and finally softening of the substance of the brain and copious effusion, (4—5 table spoonfuls) of a colorless fluid in the ventricles ;” whilst Allopathic physicians in general advise and use it successfully, in injuries of the head, concussion of the brain, inflammation of the membranes of the brain, delirium tremens and consequent *hydrocephalus gelatinosus*, in acute and chronic hydrocephalus of children, &c.

8. J. K. KOCHLIN, (see “*Von den Wirkungen der gebräuchlichsten Metalle auf den menschlichen organismus etc.* Zurich, 1837,”) says : “Silver was administered by the Arabian physicians in dropsy, and yet it is said to have occasioned fatal dropsy.”

9. *Argentum Nitricum*, according to GRAVES, causes vertigo and violent headache, while LOMBARD says that he has cured vertigo and headache with it. According to REUFF, and others, it causes inflammation of the stomach, although REUFF says that it cures chronic inflammation of the stomach ; also that it causes and cures cardialgia. According to MOODIE, (*Med. and Phys. Journal*, 1804,) it causes and cures a kind of scurvy of the gums, characterized by looseness of the gums and great tendency to bleed. In large doses it causes inflammation of the skin and eyes, and yet cures both of these diseases.

10. VAN HEDDEGHEM, (see *Précis analytique des travaux de la Société Méd. de Dijon pour l'année*, 1832. *Dijon*, 1833, p. 48,) mentions the case of a Creole in Louisiana, who was so susceptible to the effects of *Rhus Toxicodendron* that he could not drive along the roads where the rhus plant grew, or shake hands with a person who had been exposed to the effluvia of the plant, without being almost immediately attacked with the Rhus Erysipelas, which affected his face, neck, hands, arms, chest and genitals in particular. He had used very many remedies in vain, in order to deaden

his susceptibility, when finally his physician, BRESSA, concluded to give him the *Rhus grandiflora*, which produces effects very similar to those of *Rhus Toxicod.* At first it caused an erysipelatous affection of the eyelids and nose ; in course of time, however, it no longer produced any perceptible effect, but he was enabled not only to expose himself to the effluvia of the *Rhus Tox.*, but could even handle it, without suffering the slightest inconvenience.

11. EISENMANN, says, (see *Krankheit's familie Typhosis*, p. 666,) “physicians have long considered land-scurvy as very different from sea-scurvy, especially as it is a well known fact that in many regions of South America, a sea voyage is considered an almost specific cure for the there prevalent land scurvy.—Hence the conclusion has been drawn that the land and sea-scurvy, although so very similar in their phenomena, are still very different in their essence.”

12. *Arnica*, according to SACHS, (*A. A. O.*, 424,) should never be given when gastric derangement is present, because it produces gastric derangement and inflammation of the mucous membrane of the stomach and bowels, and hence can only aggravate the disease, under the above circumstances. HOPPE, on the other hand, (see *System D. Feilmeth*, vol. ii., p. 161,) recommends the use of *Arnica* in all asthenic, especially gastric fevers, in which the mucous membrane of the alimentary canal is principally affected. Again, G. A. RICHTER, (*Ansfuhr. Arzneimittellehre*, vol. ii., p. 150,) warns us to be careful in the use of *Arnica*, as it is apt to cause cardialgia, vomiting and a general prejudicial effect upon the digestive organs ; but adds, contrary to what might be expected, it is an excellent remedy and agrees very well with the system, when gastric derangement is present, and often proves very serviceable in gastric fevers, provided too large

a dose be not given. And thus it goes, one Allopathic physician knows full well that Arnica causes soporific, apoplectic and paralytic affections, also convulsions and trembling of the limbs, rheumatic affections, and blood spitting, &c ; while another praises its virtues in soporific, apoplectic and paralytic conditions ; and others, in rheumatism, gout and phthisis florida. One warns us that Arnica in large doses causes inflammation of the bowels, while another advises its use in chronic inflammations of the stomach and bowels. One sees a dysenteric affection arise from the use of Arnica, another sees dysentery aggravated in a high degree by large doses of Arnica, and on the other hand, we learn that others have used it with brilliant success in dysentery. The name womb-root has been given by laymen to Arnica, from its well known effects in exciting the menstrual flow, and provoking uterine hemorrhage—while physicians cure profuse menstruation and metrorrhagia with it. Again, Homœopathic aggravations have often been observed ; thus, ALEX. CRICHTON says that it almost always excites increased sensibility, and even pain, in parts suffering from mechanical injuries ; and RICHTER, (*A. A. O.*, 142,) acknowledges this observation to hold true in very many instances. LÖSEKE, (see *Mat. Med.*, 6th edit., p. 170,) says, Arnica, in order to prove curative, must first excite or increase pain in the suffering parts. SCHWARZE, (see *Pharmakolog. Tabell.*, p. 345,) when speaking of the use of Arnica in bruises, concussions, &c., says, it makes known the reaction which it is exciting, sometimes by a peculiar crawling sensation, (*formicatio*.) at others by the occurrence of cutting or burning pains, or shocks similar to those caused by electricity. VICAT, (see *Mat. Med.*, vol. 1, p. 19,) remarks, that he has often cured affections of the eyes with Arnica, and that it generally causes increased pain, after which a curative reaction is almost certain to follow, &c., &c.

VOL. III.—7

OBSERVATIONS AND CASES,

FROM PRACTICE

BY GEORGE W. COOK, M. D.,

OF HUDSON, NEW YORK.

The steady advance of Hahnemann's great fundamental principles in the healing art, wherever they have been introduced, is extremely gratifying to all who understand their merits, and can appreciate the vast amount of good which this, and all succeeding generations must derive from their propagation and diffusion. But in no city or county in the United States, has this new science advanced with more rapid strides than in this. Scarce two years have elapsed, since an unwilling convert to its powers dared to proclaim and defend its truths, at the risk of professional reputation and emoluments, and amid the jeers and sarcasms of an incredulous population ; and now mark the change ; more than one half of that population are warm and abiding supporters and defenders of this so recently derided system. Confident of its superior powers, they certainly trust the lives of themselves and families in the hands of those who practice it, and I may be allowed to say that nearly all are compelled to respect, while a few, impelled by more sordid motives, are made to dread its commanding influence. What has produced this wonderful change ? is a question which very naturally suggests itself to our minds. The history of Homœopathia here is not unlike that of all true sciences. The brief and ready answer is that Homœopathia with all its fundamental principles has been put to the ex-

treme test, under the most rigid scrutiny, and has not been found wanting. It has borne more than an equal part in arresting diseases of all grades and characters, shoulder to shoulder with Allopathia ; it has traversed our city and county, flinching from no responsibility, operating per se, making no draughts from Allopathia—resting on its own inherent resources—provided by nature's architect—and reduced to a *system*, not a mere principle, by the illustrious *Hahnemann*, and whenever both have been equally tested, the palm has invariably been borne off triumphantly by Homœopathia. In support of this assertion I might cite numerous cases from clinical observation ; but my purpose for the present will be answered by reporting from those which have recently occurred. The line of demarkation is so distinctly drawn, that common discrimination will enable us to decide without much consultation, to amputate Allopathy, and safely prognosticate a healthy *stump*, and a purified constitution, with Homœopathia as a complete system and not a mere principle in medicine.

This brings to mind a subject, which it has been painful to me, as it must be to all true disciples of Hahnemann, to observe some recent converts expressing an opinion, that the new practice will answer in part, but not independently. They should recollect that they have embraced one of nature's fundamental laws, which are as unchangeable as the great Architect, and we should weigh well the evidence of those venerable sages who have arrived at these conclusions by the development of facts, facts too, the offspring of years of indefatigable industry, and midnight vigils. We should ask ourselves whether we have applied those remedies with skill and discrimination, or have tested their powers with one iota of the care, that Hahnemann has, from whose hard earned fame presumption, ingratitude and indolence would fain detract.

It may be with Hahnemann as with Pythagoras, and many other of the discoverers of the exact sciences, who have not only passed off the stage of life before their worth was duly appreciated, but have had their discoveries veiled in obscurity by that fatal trio, Ignorance, Indolence and Prejudice, for thousands of years, until some more fortunate genius, a second Copernicus may succeed in riveting a sufficient degree of attention to develop its merits. He can fear no such results from any other source than those who seek to satisfy the prejudice of the public, by professing to blend it with Allopathia. From such disciples are we to apprehend the greatest amount of evil for the fundamental principle, (*similia similibus curantur*) is as true as the polar star, or it is as destitute of the qualities requisite for a land-mark, as the flitting meteor ; it is a sure beacon light which will always lead us to a safe haven, or it is a will-o'-the-wisp, which will only lead us into a quagmire. Although I am not apt to bow submissively to the laconic sentiment of the Roman Satirist :

“ Did Marcus say 'twas fact ? then fact it is,
No proof so valid as a word of his.”

Yet, my own experience concurring, during my Allopathic, as well as Homœopathic career, with the sentiments expressed by able experimenters, that this is an immutable law of nature, who maintain from facts, that all the skill in prescribing for diseases depends upon the acuteness with which this law has been discerned, through ages past, I feel that it would be more modest for me to acknowledge my own inability to detect the organ or time effected, and select the remedy Homœothic (or specific) to that disease, and press on endeavouring to reach the mark of perfection which others have attained, than to denounce

the system as imperfect. But suppose a disease should arise which would baffle the skill of the most experienced and skilful Homœopathic practitioner, one who at a glance was capable of surveying the dynamic effects of the whole catalogue of remedies, introduced into practice, would this prove an error in the law, S. S. C. ? could you then say that one of the three kingdoms of nature would not yield the specific ? The old school recognise a few specific remedies, reduced to practice by the experience of many centuries. The new school goes far beyond this ; Hahnemann and his disciples not only account for the specific action of these, but extend the enquiry, and find that all remedies are governed by a known law, and inasmuch as the distinction between the various dynamic conditions of the system is important, so is the necessity of selecting the suitable remedy indispensable to the cure. *Sulphur* has been for ages past accepted as a cure for the *Itch*, but has been found totally inert when used for a great variety of cutaneous diseases assimilating *Itch*. Hahnemann extends the enquiry, and shows that the remedies are as various and multiplied as the diseases of the skin. Allopathia professes to believe Mercury the only specific against *Lues Venerea*, and pushes it to the extent of *ptyalism* ; Homœopathia acknowledges its specific power, but reduces it to its curative powers, divesting it of all those unnecessary powers, which leave in its train diseases (if possible) worse than the one it was intended to cure.

This brings to mind a case directly in point, and shows how important it is to draw from our own reason when the beaten track has failed, and admonishes us that we may do much in this country towards adding to the general stock of Homœopathic practice.

M. W. a builder by trade had been gradually run down by cough and expectoration, which became worse and worse, from mu-

cous to muco-purulent, until the latter part of the spring of 1841, when he called on me, presenting the following symptoms. Countenance pale, ghastly, and emaciated, shoulders thrown forward, chest bent, coughing deep, hollow and laborious, ending in expectoration of heavy pus, occasionally streaked with blood, regular return of fever twice in twenty-four hours, terminating in profuse perspiration, vomiting his food after coughing ; stethoscopic examination showed the cavernous respiration throughout the *vesicular, bronchial* and *tracheal* region, at first, and afterwards the *râle muqueux*. A family predisposition to Phthisis alarmed me as to the result. I, however, prescribed some of the leading remedies, with no other than a mitigation of the symptoms, and it was evident that my patient was fast hastening to that bourne whence no traveller returns, when the group of symptoms indicating P. I. Hyd. I prepared the first dilution of Proto Iod. Hyd. and gave him grain powders twice a day, and in the course of a few days had the satisfaction to see a clear and decided amelioration of all his symptoms. I tried higher dilutions, and other preparations of the Hyd., but my patient would immediately relapse ; but uniformly whenever he was under the use of the first dilution of the Proto Iod. Hyd. he continued to improve, and so positive was the action of the remedy, that he often remarked, that he believed he would always be obliged to take that medicine and live upon it. This was continued about three months, occasionally intermitting, as the disease gradually wore off, and the cavernous respiration changed to the mucous, and from that to a state of health, and in less than five months my patient returned to his avocation in perfect health, and continues so to the present day, to the astonishment and gratification of his numerous friends. I treated another case similar, with a like result, with the same remedy.

Either of these cases was manifestly beyond the reach of all my former knowledge of the medical art, and this brings to mind how much a practitioner of Homœopathia has to contend against, and make friends from those whose prior prejudices have rendered them averse to the practice, unless it accomplishes cures, and speedily too, which have uniformly resisted the most skilful practice from the old school. But let not the recent convert to the new practice be discouraged at this; Homœopathia, rightly administered, is equal to the task imposed upon it, and when conviction is sent in this way, it makes friends which all the misrepresentations of designing knaves can never circumvent.

As an illustration of the manner in which Homœopathia has had to climb the elevation which it now occupies here, I will give briefly a few cases which occurred in a highly respectable family, who were much attached to their former family *physician*, and very reluctantly gave him up.

The lady, aged fifty, had been subject to the inflammatory rheumatism; each paroxysm was protracted to a greater length than the former, and her convalescence was rendered very tedious, by the active antiphlogistic treatment heretofore adopted. Perfectly incredulous as to the power of Homœopathia, she was induced to make the trial from having heard of many cures of rheumatism in the city, but as she expressed herself, she reserved the privilege of returning to the old system, if not cured in a few days. Here, then, was a case of Inflammatory Rheumatism, already well established, under her own domestic remedies, ready, as on former occasions, for an Allopathic course of bleeding, blisters, cathartics, anodynes, and mercurial salivation, to pass through a month's siege, and to satisfy the patient and family, must be cured in one week, and an improvement must be manifest in a day or two, at most. I prescribed Acon. and Bell.,

to subdue the inflammatory fever, followed in due time by T. Sulph. and finally China. The improvement was immediate, and the seventh day I dismissed my patient cured, and she has scarcely had a pain since, now more than a year. This made an impression on the patient, as to the power of the practice in this disease, at least; but I have since had to treat one case of acute *Hepatitis*, three of *scarlet fever*, one of measles, and one of influenza, in the same family, comprising every member, to make them firm and unwavering supporters of the reformation. Allopathy has now taken its final leave of their home.

In presenting the following cases for the consideration of all candid readers, I shall confine myself to such points as came under my immediate observation, such Allopathic treatment as was pursued in the first two cases before they came under my care, or after they passed out of my hand. I will give briefly, as it came to my knowledge, either from the physician prescribing, or from the attendants. The two cases that follow were under Homœopathic treatment throughout, and he must be a sceptic indeed who will doubt medical agency in the restoration of the three last cases, and the futility of expecting any relief or advantage by exchanging Homœopathic for Allopathic treatment. My experience goes to prove that when the practitioner of medicine, after Allopathic experience, has made himself acquainted with the resources of Homœopathia, and fails under the latter to give quick and ready relief, the patient's chances of recovery are materially lessened, nay, hazarded, if he is placed in the hands of a strictly Allopathic practitioner. There is something about Homœopathia, when it is used in incurable diseases, that contracts, holds the disease at bay, and smooths the pillow of the patient; thus we see in those cases of confirmed consumption, which are so distressing in their latter stages, under ordinary practice. Under

the controlling influence of the reformed practice, although the lungs are far gone with ulceration, or filled up with tubercles, the pulse almost countless, and intermittent, the feet swollen, the mouth sore, the stomach and bowels racked with the pains peculiar to this disease, attended with frequent bursts of diarrhœa; all these are rapidly and soothingly controlled by the remedies which Homœopathia affords, and keeping these principles directly before us, who can say but that many of those diseases which have heretofore always baffled the most skilful of those practitioners who have only the Allopathic principles to guide them in their choice of remedies, may not only be controlled, but actually cured by a skilful discrimination of the pathogenesis, and suitable selection of a highly indicated remedy. I might cite in support of this some cases, which had been pronounced by skilful Allopathic physicians, confirmed and incurable. One occurs to my mind at present, which was the case of J. V. V. of Catskill, of Catarrhal Phthisis Pulmonalis, in that stage in which his physicians had given him up, and were allaying his sufferings by *Morphine*, when I was called to see him. Satisfying myself by minute examination that his difficulties were still confined to the membranous tissues, I commenced an energetic treatment from the resources of Homœopathia, and have now the gratification (six months after) to see him restored to health and usefulness to his family. If a disease of the periosteum, producing an osseous tumour, can be removed by an internal specific, which I have done from the os malæ, with a few doses of *Silicea* and *Calc. C.* after I had myself, while practising the old system, vainly endeavoured to disperse by blisters, liniments, Iodine plasters, &c., if such tumours, manifest to the eye and touch, are quickly dispersed by a suitable highly adapted remedy, who will deny that much may not yet be learned, both in the selection of a

remedy already in the catalogue, or in the discovery of some from the bountiful stores of nature.

Case 1. J. S., aged twenty, was taken with pains in the head, back, and limbs, loss of appetite, acid eructations, irregularity of the bowels, which for some days had been either costive or loose, sleeplessness, confusion of intellect, and other usual accompaniments of bilious fever. An Allopathic practitioner was called, who gave cathartics, diaphoretics, and refrigerants as usual, the patient growing rapidly worse; the remedies not reaching the cause, of course tended rather to aggravate than allay the excitement, and those friends with whom he resided called on me, and dismissed his present medical attendant. I found him labouring under the following discouraging train of symptoms; dull pressive pain in the head, across the forehead and eyes, with confusion of ideas, sleepless—restless—talking and muttering whenever he closed his eyes, injected face, flushed tongue, coated, whitish, yellow on the edges, with a brownish dry centre, breath fœtid, respiration hurried, and oppressed, with an occasional hacking cough, soreness around the hypochondria, scrobiculus tender, full; tympanitis, which extended over the abdomen, alvine evacuations sparing and light coloured, urine thick, and depositing a heavy sediment, skin dry, pulse 120 in a minute, wiry and intermittent, and altogether the case presented features which would justify an unfavourable prognosis. Not relishing the chance of taking a case from another, who had occupied the best period to apply suitable remedies, and having had some experience of the difficulty of treating a case when the specific character of the disease was changed, and new symptoms developed by medications, I could not feel confident of a favourable convalescence, except after a tedious medication. However, a few doses of *Nux Vom.*, to relieve the *chylopoetic viscera*, and

change the evacuations, in their frequency as, well as colour, followed by Aconite, which relieved the fever with the aid of Belladonna, and then Bryonia, produced so marked a change in six days, as to induce a hope of a more favourable and rapid result than I had a right to anticipate; but the imprudent ingestion of chicken soup disappointed my hopes, and the fever returning did not give way during the following week, which terminated my attendance. His friends from abroad had called another practitioner, whom I met in consultation, for the purpose of placing the patient in his hands understandingly; we agreed as to the nature of the case, and also in our prognosis, which was favourable, but the next point was not likely to be so easily agreed upon; salivation being the mainsheet-anchor of Allopathy in these cases, was, of course, urged, my convictions being strong that the patient's chances of recovery would be lessened by this result. I of course, yielded the case to Allopathy and Mercury, harmoniously, however, for I agreed to see the patient as a friend occasionally, that I might note the rapid recovery. As soon as the gums were touched, as the Doctor expressed it, an emetic was the entering wedge, followed by calomel and opium in repeated doses, and on seeing him twenty-four hours after he had the opium pulse, delirium settling down into a low muttering character, and no amelioration of his disease. Ipecac. spirit. mindereri, spirit. nitr, Dover's powders, and calomel, blisters, and irritating mustard plasters, were all frequently given, and applied in rapid succession. During the course of the treatment, two other physicians were called in after the fourth day, when salivation was distinct, but not beneficial, and, of course, a great deal must be done where three physicians are in attendance, for according to the rules of Allopathy, there can be no sins of commission, they know of no medicinal disease, and dread the sin of omission, and he

who gives the most medicine satisfies his conscience that nothing has been left undone that could be done in the way of doing. His strength sunk in proportion as he became saturated with Mercury, without the least mitigation of any of the difficulties. In ten days the patient could not speak so as to be understood, his mouth and throat being in a shocking state of ulceration, tongue swollen, dry, and brown; now Quinine with nervines and wine, were given, up to the last hour of his existence, which terminated just two weeks after I withdrew. I have been thus minute in recording the treatment in this case, for the purpose of showing that salivation is not the best way of curing a fever, and have not had the least intention of detracting from the merit of the practitioners, who, no doubt did all in their power, I mean all they supposed was in their power, to snatch this young man from the grave, and they never will know of any other remedy until they study Homœopathia — it would be unbecoming in me to say that its resources would have altered the case if it had been continued; but the following case will prove, that after salivation had been pronounced indispensable by the attending physician, I had the satisfaction to prove the contrary, directly upon the heels of the other case.

Case 2. F. H. aged 21, had been under Allopathic treatment a few days, and salivation was pronounced indispensable, by one of the physicians who attended in the previous case; the family objecting to this sent for me; previous engagements precluded the possibility of my seeing him for twenty-four hours thereafter, when I found his case to present most of the characteristics of the above case, in its early stage, except that his congestive difficulty was most prominent in his bowels, which were very much bloated, and somewhat tender, a paroxysm came on every night, and dysenteric discharges, were rapidly depressing

the vital powers: Merc. sub. for that condition of the alvine evacuations, with Acon. and Bell, during the paroxysm of fever, improved his case rapidly; Arsenic and then China was followed by convalescence. Tinct. sulph. for a torpor of the intestines, and my patient was about again without salivation.

Inasmuch as I have taken the liberty to repeat two cases in the treatment of which Allopathy had a share, the one ending fatally under salivation—the other favourably without salivation, it is no more than meet that I repeat two more cases of parallel types, which occurred at the same time, and were entirely under my care from beginning to end, and, of course, Homœopathia is entirely responsible for the results.

Case 3. J. D. aged sixty-two, for some time felt an inability to perform his accustomed exercise, both mental and physical, gradually progressing to loss of appetite, restlessness, and sleepless, confused dreams, muttering nocturnal delirium. The delay in obtaining medical advice arose from an aversion to giving up to be sick, until the disease was well established; when I was called, I found, in addition to the above symptoms, wild expression of the eye—nausea—tongue coated deep greyish, and dry and brown in the centre, lips parched, breath offensive, fauces inflamed, skin dry, hot and parched, chest oppressed, cough deep and suffocating, scrobiculus and hypochondria tender, sore, and distended, while he complained of a sensation as if girt around tight with a cord, bowels sluggish, painful and full, limbs aching and numb, urine high coloured, depositing a reddish sediment, pulse 120.

I brought his system under the influence of Aconite, as soon as possible, and subdued the active character of the attack. Nux vom., followed by Bryonia, then had a happy effect, in keeping up a soft skin, and restoring the biliary secretions, and together with Bell. in attenuation, subdued the delirium and conges-

tion of the brain, and larger viscera; these were followed by Ipecac., which dispersed the remnant of cough, tongue cleared off, and all the organs gradually performed their accustomed functions, and convalescence was not retarded by any undue medicinal action.

Case 4. P. S. W. aged 23, sanguine, nervous temperament, had suffered from erysipelas of the face, and scalp, hair had fallen out nearly to baldness, with patches of scaly ulceration interspersed over the scalp; took a severe cold from exposure on horseback, in bad weather, neglected himself and gradually sunk down into a low fever, attended with pain in the whole head, eyes dull, heavy, conjunctiva injected, tongue coated, deep yellowish on the edges, with a dry, brown thickly coated centre, lips dry and cracked, teeth covered with dark brown sordes, face flushed, skin hot, dry, and imparting a burning sensation to the hand when applied, chest oppressed, respiration rapid, pulse 130, hard and wiry, cough frequent, rapid and distressing, scrobiculus and hypochondria tender, bowels sluggish and bloated, aching of the extremities, sleepless nights brought on furious delirium, so much so as to render it difficult to control him, or keep him in bed; at one time supposing himself in prison, at another in the most loathsome place, crowded between horses, and spitting out the filth from his mouth, and again supposing his bed filled with ice and ice water. These furious symptoms yielded to an energetic administration of Belladonna, and after the fourth night he awoke from some hours' sleep, and a gradual restoration to health, under the various remedies which were called for, as in the former cases; but no Mercury was called into aid in the treatment, and this case was important in establishing the reformed practice, for the first case in this series had just terminated, and the physicians as well as laymen opposed to the practice, were using all their art to induce the friends to call in a practitioner of Al-

lopathy, alledging that the patient would die for want of medicine.

How grievously disappointed they must have been! their kind interference has cost many a poor patient his life, and this case was a strong lesson to them; a rebuke which they ought not soon to forget, and those who were foremost in obtaining a change of practice in the first case in this series, would have felt the awful responsibility which they had drawn upon themselves, if they had had one spark of the anxiety and solicitude which a physician often feels when he knows that he has the life of a fellow mortal entrusted to his charge.

I have treated several cases of strongly marked dropsy of the head, since I communicated my first case to you. They being mostly like that reported, need not be reported here; some were more decided; one had been under Allopathic treatment, and the family having lost one before under the same treatment, made it worth noting, and another had some features worth recording. A boy about four years old had a violent catarrhal fever, with cough and congestion to the head, which was large, but well shaped; without detaining you with particulars, it will be sufficient to state, that when my attention was called to him, he had sunk down into that state which is characterised by moaning, rolling the head, moving the right arm and leg up and down, pupils dilated, urine and fæces soon passed involuntarily. I gave Bryonia and Belladonna alternately, and in the first dilutions, so that he might feel an impression soon. The patient being four miles in the country, I could not see him as often as would have been useful, but there was no positive amendment for near a week, although the active character of the disease was arrested, but I could not give encouragement in the case until about one week, when he gradually began to emerge from this condition, by an occasional scream, and finally a returning con-

sciousness, so as to be able to notice when food was given, and in a few days more in attempting to use his hands, he had no control of them; they would pass beyond the object, or fall far short of it, error in vision assisted this condition; his head would fall on one side in attempting to sit erect; soon it was discovered that he could not speak, and finally; as he recovered strength, and began to totter about, there was just cause for apprehending that he might never speak; however, his hearing being good, I assured his father that his power of speech would return, and after some months he began to try his skill at speaking, and has now, after a period of six months, nearly recovered, although he speaks much slower, and more carefully than he did before his attack. Can any one doubt that this disease was on the brain? there certainly was inflammation and effusion to produce this condition, and the effect of the treatment was clear; just as he began to emerge from the state of unconsciousness, my attention was directed by the nurse to a great number of small blisters or vesicles, of a deep red colour filled with water, all over the extremities and trunk. Was not this an effect brought about by the *Belladonna*? Compare it with the pathogenesis of that remedy, in Hull's Jahr, under the section *Trunk*. I have a great many facts to prove the pathogenetic powers of the last remedy in scarlet fever, which has been prevalent here for most of the time of my Homœopathic career, but as I shall endeavour to collect and arrange them under an appropriate head in an article on the scarlatina, as soon as my time will permit, it is not worth while to introduce any of the facts here.

Yours cordially,

GEO. W. COOK.

DENTAL CASES,

BY B. C. DUTCHER, M. D.

[Dr. Dutcher is the first American dentist to discover the value of the Homœopathic *Materia Medica*, in the medical department of his art. At least he is the first of his profession in this country, who has had the industry to apply Homœopathia in the management of the teeth, and at the same time the honest independence to make this practice known to the public. The cases he gives us below forcibly illustrate the utility of our mode of treatment in affections of the teeth, and show, as far as so small a number can, how necessary it is, for the well-being of the sick, that all dentists should be conversant with, and apt in the application of the Homœopathic resources.]

We could cite numberless cases of similar import, from our own practice, albeit we do not perform dental operations; cases, in which not only sound teeth have been saved from needless extraction, but a vast amount of suffering, and various dangers to the constitutions of patients, have been averted by the timely application of the sure specifics for the teeth, with which Homœopathia, rightly practiced, abounds.

The German records of practice contain many interesting papers of great practical value, consisting principally of reports of cures of the various forms of tooth-ache, and of neuralgic affections of the teeth and jaws. We shall hereafter present some of these cases to the readers of the Examiner.

The influence which the constitution and the teeth reciprocally exert upon each other, and especially the not very unfrequent occurrence of a symptomatic phthisis of very fatal tendency, from neglected or ill-treated teeth, demon-

strate the importance of the Dentists always being medical men, of sound reading and good natural powers of observation. Dr. Rush gives several cases, in his treatise on Pulmonary Consumption, of that disease, apparently in the last stage, being cured by the proper management of the teeth!—Ed.]

Case 1. Mrs. — had sharp, drawing and shooting pains in the head, daily, from about four o'clock in the afternoon, until about four the next morning; aggravated by the heat of the bed, and by a recumbent posture; heat and burning in the eyes, sharp, piercing pains, and roaring and buzzing in the ears, sharp and drawing pain in the cheek bones, successive sharp and jumping pain in the right side of the lower jaw. She had laboured under these sufferings for nearly two weeks, during which time she had consulted a practical Dentist, who to relieve her sufferings had at different times extracted two of her right lower large double teeth, supposing the difficulty to have originated from injuries connected with them, both of which, however, proved upon extraction to be perfectly sound.

In this stage of the case she applied to me for advice, still labouring under the sufferings which I have detailed, and which, she stated, had remained about the same from the time she was first attacked. I gave her Bell. 3, and on the next evening found her very much relieved; I then gave her Con. 10, and on the evening following I found her entirely free from pain. About ten days after, she was attacked with a severe catarrh, when there was a slight recurrence of her previous sufferings. I gave her Nux 3, and followed it the next day with Bell. 3, which entirely subdued the neuralgic pains, with which she had so severely suffered.

Since that time, now about two years, she has had no return of them.

Case 2. Mrs. R. sent for me to extract a

tooth from which she was suffering very severely. I found her labouring under severe pain in the mouth, tongue, and palate, as if the whole were excoriated. There was an accumulation of a yellowish white mucus in the mouth, superficial ulcers upon the gums, which emitted a fœtid odour, pimples and painful blisters about the mouth, and upon the tongue and palate, breath very offensive, and an accumulation of dark sordes about the teeth, with considerable tumefaction of the gum, about one of the lower right molares. I declined extracting the tooth notwithstanding she urged its loss, and gave her Acon. 3, and four hours after Nux 3. The next day I found her quite free from pain, and the ulcers about the mouth possessing a healthy appearance, these in a few days were all healed; since which, now some six months, she has had no recurrence of the difficulty.

Case 3. The following is the case of a lady, which occurred in my practice about three years since. She had lost the four upper Incisores, and applied to a dentist residing in the upper part of the city, to have them replaced with artificial ones. He advised her that it would be necessary by all means, to extract six more, and replace them with artificial teeth, embracing three on each side, viz. the two eye, and four small double teeth in the upper jaw, as it would be impossible, from the state they were in, to save them. She submitted to have him extract one of the eye teeth, and concluded, as the operation was severely painful, to defer the extraction of the remainder to a future day.

Her friends, dissatisfied with the advice she had received, recommended her to call on me. Upon examination of her case, I found the gums, particularly around the remaining, and four small double teeth above, in a very spongy state, and covered with several small ragged ulcers. The gums would bleed freely from slight irritation upon them. They were entirely detached from the necks of the teeth,

and yellow matter was constantly exuding from between them and the teeth. The tongue was coated with a heavy yellow mucus, and the breath very offensive. Her general health was poor. All the teeth were covered with a hard black concretion, extending under the gums, around the necks of the teeth, which I cleaned off with instruments. I found the eye tooth and four small double teeth above, affected with caries, I removed the defects and filled the cavities with gold.

For the disease about the mouth and gums, I gave her Mer. 3 once a day for three days, which produced a very great improvement. After an interval of two days I gave her Sul. 6, a powder for two days in succession. After an interval of six days, I gave her Mer. 3 again for three days, a powder each day. This I followed after a few days, with a couple of powders of Bell. 3, after which I set her teeth in front, and dismissed her cured. I saw her but a few days since, and she told me that her teeth and mouth had not troubled her at all since I treated her, and that her general health had been much better since, than it had been for years before.

HOMŒOPATHIA IN EUROPE,

FOR THE YEAR 1841.

Communicated by C. Croserio, M. D., to Dr. Neidhard, of Philadelphia.

PARIS, SEPT. 25, 1841.

DEAR AND HONOURED COLLEAGUE,

I THANK you greatly for your kind letter, as well as for the number of the Homœopathic Examiner, and Dr. Hull's interesting Memoir. I beg you to thank our learned colleague for me. The statements with regard to Homœopathia in the State of New York, will be valu-

able matter for my "Annuaire Homœopathique."

If I could regularly receive the Homœopathic Examiner, so rich in discussions and instructive facts, I would notice it "in extensum" in our "Bibliothèque Homœopathique," and I feel persuaded that it would possess great interest for our readers. A long time has elapsed, dear sir, since I last gave you an account of Homœopathia in the Old world. I will now endeavour to communicate to you, in a few words, the most striking facts.

Lisbon, which, from the honourable decision of its Royal Academy of Medicine towards Hahnemann, appeared eager for progress, has nevertheless remained stationary. The philanthropical zeal of men, distinguished both by their rank and learning, who came to confirm their Homœopathic convictions in France, and desired to introduce them into their own country, has proved fruitless. They were unable to rouse the indolent inactivity of the physicians of that country, and ignorance won the day. In Spain, the case has been different. Several old practitioners in Madrid have studied the new medical doctrines with perseverance and success. The students of the University attend Dr. Coll's Homœopathic Lectures eagerly and assiduously. Valladolid, Barcelona, Badajos, Cadiz, and other important towns of the kingdom, have their Homœopathic practitioners, and the Academy of Medicine, at Madrid, forwarded to Hahnemann, of their own accord, the diploma of honorary membership in their society.

In France, we have made some important acquisitions among the old physicians. The south, which hitherto lingered behind, actually advances. At Montpellier, several professors of this celebrated school have embraced Homœopathia. A lawyer, distinguished for his abilities, rich, and more than fifty years of age, has submitted himself to the examinations of the faculty, and obtained the degree

of Doctor of Medicine, animated solely by his enthusiasm for Homœopathia, and the desire to spread its benefits gratuitously among his fellow citizens, that they might not be exposed to the maltreatment of the Allopathists and the apothecaries.

The mayor of a corporation near Fontainebleau is preparing to do likewise, although he has already passed his sixtieth year. The benefits produced by Homœopathia must be indeed powerful, to influence to such a degree, men whose fortunes and years would lead them rather to repose, than to pursue the painful labours of the student in so intricate a science, or to undergo the anxiety of examinations, solely for the satisfaction of their consciences, and love for their fellow beings.

Our dispensaries in Paris have the care of more than 10,000 patients annually. The friends of Homœopathia give us reason to hope, that we shall soon be able to establish an hospital. The school of Medicine at Paris has begun to dread the new doctrines. It is awakening from the extreme indifference with which it has hitherto treated them. Seeing their incessant progress, and the number of patients our school cures daily, it dreads the spreading of the contagion to its own bosom, and especially among the students, whose desire, above all, is to learn to *cure*, previous to returning to their homes. To avoid this, they have expressly forbidden them to defend any of the principles of this doctrine in their inaugural dissertations, under penalty of being rejected. This prohibition only serves to excite their curiosity, and many of them come to my clinical course, to see the monster that frightens all their professors.

Thus Providence always permits some small good to come out of the greatest evil.

You will doubtless be glad to learn that our venerable master enjoys excellent health, notwithstanding his great age. His body and mind preserve all the activity and energy of

middle age. He is going to publish the sixth edition of his *Organon*, revised, in French, and written entirely by his own hand, in the intervals taken from his occupations with the immense circle of patients by whom he is continually surrounded.

The 10th of August, we celebrated at his own house, the 62d anniversary of his doctorate. The guests were numerous and animated with pleasure at seeing this man thus recompensed in his old age, for his immense labours in the cause of humanity. The illustrious host, also visibly rejoiced in seeing himself surrounded by his attached friends, his numerous patients and disciples; for his heart is open like a child's to every mark of friendship and affection. Drs. Calandra of Palermo, and Sommers of Berlin, read, each of them, a copy of verses in their mother tongue, on a subject of great interest to the company; for these "réunions" have a peculiar character of cosmopolitanism, which is met with nowhere else. The language of the country is the one least spoken, and I had the pleasure of conversing in Spanish, Italian, English, and German. This is a centre, where all nations unite in brotherhood, in sentiments of veneration for the illustrious founder of Homœopathia, and in reciprocal testimonies to the superiority of this doctrine over all others which have preceded it, being, for the most part, living proofs of that power to which they owe their health, and, many of them, their lives.

Italy also advances in the adoption of the new truths. We have excellent news from Turin, and particularly from Milan, where the Austrian General-in-Chief, Conte de Radosky, has been lately cured by Homœopathia, of a Sarcoma of the bone, which it had been pronounced indispensable to extract. This cure makes a good deal of noise in Italy, and doubtless also in Austria, from the high rank and reputation of the patient, and has opened the eyes of the most incredulous to the power of

the small doses, as they are termed. Rome will become a powerful centre for the propagation of the new doctrines. Wahle, of Leipsic, with his experience and perspicuity, has gone to the assistance of those of his colleagues who have been practising for several years past in that city. You know the skill of this distinguished Homœopathist, and may be sure that, notwithstanding his modesty, he will make himself well known in that metropolis. Hahnemann himself induced him to take this step, in order that Homœopathia might have a worthy representative in that capital. I will not mention Sicily, for there Homœopathia is embraced by the majority of the inhabitants; but Naples, which, after having given the first impulse to the establishment of Homœopathia in the south of Europe, had remained stationary, notwithstanding the activity and ability of its worthy apostles, Romano, Mauro, and De Horatiis, has aroused itself again of late, and several physicians have joined this illustrious triumvirate, either in the capital or the province, to spread the blessings of the new school of medicine among the unhappy inhabitants of this happy clime.

Germany is always the classic ground of Homœopathia. It is so well acclimated there, that physicians come thither from all parts, and are forced to remain there, despite themselves, by patients who will not be treated under another system, or at least will not suffer their blood to be shed in the profuse manner of the old school. All physicians indeed have modified their practice more or less, according to the laws of the simple doctrine of Hahnemann.

You are doubtless aware, through the journals of the country, of the unanimity of opinion that Homœopathia has obtained in the two Chambers of the kingdom of Saxony,—twice on occasions of subsidies being demanded by the Homœopathic Hospital at Leipsic, which the ministers were desirous of refusing. The

most powerful arguments adduced were, that Homœopathia had sensibly modified the practice of all the physicians in Germany, and that consequently it was important for the government to facilitate its study, and conduce to its perfection. The houses of the Grand Duchy of Baden have also signed a similar statement in favour of Homœopathia. The burgomasters of the city of Meissen have bestowed the title of honorary citizenship on Hahnemann, and have had the delicacy to present the diploma to him, through the Minister of Saxony, on the 10th of April, his birthday. This spontaneous act of the principal association of a city, in favour of the founder of doctrines which they consider beneficial to humanity, living twelve hundred miles apart from them, and all these acts of public bodies, are the best proofs of the consideration and esteem in which Homœopathia is held throughout the country. The clinical Homœopathical hospital at Leipsic answers its purpose well, since it has been directed by young Professor Noack. His treatment has been extremely successful, and his clinical lectures on Homœopathia, excellent and well attended.

Dr. Fischer, of Vienna, has also been very successful in his Homœopathic hospital. This physician often uses applications of cold water as an hygienic auxiliary to Homœopathic specifics given internally.

Thus you perceive, dear sir, that Homœopathia, notwithstanding the powerful attacks it has had to repulse, from individual interests and the established habits of two thousand years, in less than half a century has penetrated the whole "corps social," and we may well hope that it will soon become paramount in every school.

Adieu—ever yours.

CROSERIO.

REVIEW.

"NEW HOMŒOPATHIC PHARMACOPŒIA AND POSOLOGY, OR THE PREPARATION OF HOMŒOPATHIC MEDICINES, AND THE ADMINISTRATION OF DOSES, BY G. H. G. JAHN. TRANSLATED, WITH ADDITIONS, BY JAMES KITCHEN, M. D.: PHILADELPHIA, AND NEW YORK." 1842.

This book should be in the hands of every student of medicine. It is the most succinct, and therefore the readiest reference statement of the names and physical qualities of nearly, if not quite, all the medicinal agents at present known.

The student and practitioner of Homœopathia will find in it a very useful daily companion, on account of the instructions it contains, for the peculiar modes of preparation practised in their school.

It is the only work of the kind accessible to the English and French reader. Dr. Kitchen of Philadelphia, the translator, has rendered an invaluable service to the American Homœopathist, by presenting him, with such promptitude, and also with religious uprightness, so important a compilation of the rules peculiar to his pharmacology. It is a service which will not soon be forgotten.

Of Jahr, whose laborious "New Manual" is hardly dry from the press, before he gives us this farther proof of ceaseless industry, and of his indomitable zeal in the good cause, what can we say that would not mar, rather than express, the sentiment of gratitude and approbation with which his newest work inspires us!

There is in Jahr such resolution to lay the facts and practical instruments of our art before the whole profession; such abandonment of the selfish at the shrine of the useful, such negation of the spirit of brilliant speculation, of system making; such an humble willing-

ness to be the drudge instead of the overseer ! We cannot help hoping that he will realize in after time, the sublime reward, or rather result foreshadowed by the words of manifold, perhaps of infinite import : " he that is least among you shall be greatest." Whatever the new schismatics of Germany may say of Jahr's adherence to the dicta of Hahnemann, we thank him for it ; we greatly prefer his laborious compendiums, his faithful systematic arrangements, of the *Materia Medica* to any and all of the proud theoretic essays which the ambitious writers of our school have produced within twenty years.

The work before us fully redeems the promise of its title-page, as will appear by the following extracts from the Author's Preface, describing its plan.

" The work has been distributed into *three parts*, the *first* of which treats of *general rules* for the preparation of Homœopathic medicines ; the *second*, of the obtaining and preparation of each substance in *particular* ; and the *third*, of the *administration* of medicines. The subject of this last part is not found in any of the preceding Homœopathic Pharmacopœias ; but as this work is intended for the use of physicians as well as pharmacutists, we have thought that it would be of advantage to both, and, perhaps, chiefly to physicians, to find united in one work the *Homœopathic Pharmacopœia and Posology*.

" The number of substances described in this work amounts to 310, of which 200 only are treated in our *New Manual* ; we have thought it proper to introduce about 110 articles not yet admitted into treatises on the *Materia Medica*, though they have been placed in the German Pharmacopœias, in order that those who would study their effects, might agree on the substance and preparation of their studies. That is also the reason why we have not hesitated to give admission to the medicines of which Dr. Fickel (Heyne, Hoffbauer, &c.) has published the imaginary or forged pathogenetic effects ; for

how ridiculous soever it might have been to admit them into the *Materia Medica*, the description of the physical characters of these substances in a Pharmacopœia, will break no one's bones, and may be the means, on the contrary, of engaging us in the more exact study of their effects. Moreover, the number is not very great ; they are *Actæa spicata*, *Aquilegia vulgaris*, *Atriplex olida*, *Chenopodium glaucum*, *Cahinca*, *Nigella sativa*, *Osmium*, *Physalis Alkekengi seu Solanum vesicatorium* ; all that has been published on these substances, in the French Homœopathic journals, should be totally rejected, since they are but the translations of erroneous publications, as above mentioned.

" As to the order in which the substances are arranged, it appeared preferable to divide them according to the kingdoms of nature, whence derived, and to precede them with general considerations, and a glance at the classes and genera to which they belong. Thus, in the *first* chapter of the second part, will be found a general coup d'œil of the mass of our medicines ; in the *second*, of the *minerals* and chemical products ; in the *third*, of the *vegetables* ; in the *fourth*, of the *animal substances*. In each of these chapters, we have again divided the substances into two orders, viz., 1st. Those found in our *Manual*, or *generally used*. 2nd. Those not as yet found in the *Materia Medica*, not having been studied, and which we have designated as substances *little used*. Finally, in the *fifth* chapter, we have also treated of the nature and Homœopathic use of some imponderable matters, as well as of several accessory substances, which, though not employed as medicines, have appeared to us to merit the attention of Homœopathic physicians. Our chief object in treating of these last substances is, above all, to induce Homœopathic pharmacutists to keep them in their shops, since the greater part of those found in commerce are always more or less adulterated."

Dr. Kitchen has written a very spirited preface of a fair polemic kind, and he appears to have made some additions to the text of the

author. We conclude our hasty sketch of this valuable work by quoting the last pages of Dr. Kitchen's preface :

"Exceedingly erroneous ideas prevail among physicians, who have acquired a mere smattering of the doctrine, in relation to Homœopathia. Some of them announce to their patients that they are as much Homœopaths as those who style themselves so, because they frequently give small doses of medicine ; as if Homœopathia consisted alone in the administration of small doses. To expose such ignorance, it is only necessary to mention that drachm doses of the mother tincture have occasionally been exhibited. It shows that they neither understand nor comprehend the grand principle of the administration of remedies, 'similia similibus.' The dose is merely secondary ; but if the millionth part of a grain will answer the purpose as well, or even in many cases better than a whole grain, it is allowable, certainly, and even reasonable, to use no more. Now experience teaches us that such is the fact ; and hence our use of small doses ; but we must at the same time be careful to administer them on the Homœopathic principle. Others, who do not evince such ignorance, say that cures are performed by a system of diet. If this be so, let them diet too ; it is surely much better and more pleasant to perform cures by little sugar-plumbs and diet, than by nauseous potions and drastic purges. Imagination is, with others, the chief actor in this wonderful drama, and all Homœopathic cures are accomplished through its agency. But this is triumphantly refuted by the very superior efficacy of the medicine in all diseases of children. The same remark holds good in reference to the lower animals, in which, we trust, no one will ascribe the cure of their diseases to imagination, or faith in the physician. But even granting the absurdity, still, if cures can be performed in this way, the method is a superior one, and a very pleasant one. Some, again, say our medicines are totally inert, while others contend that we use poisons. The first class deserve no answer : to the second,

a passing remark is all that is necessary, to wit : if Homœopathic medicines are poisons, when used in the millionth or ten millionth part of a grain, what epithet should be applied to Allopathic medicines, since they are, in the majority of instances, the same drug. These objections are but poor subterfuges for valid and true answers to the propositions and practices of the Homœopathic school ; and until something of a far superior and more available cast is brought forward, Homœopathia must and will go on, for "truth is powerful and will prevail" ; and facts will stand fast and cannot be cast down or trodden under foot, except by facts of a stronger nature, and more powerful calibre. No answer has yet been given to the doctrine. Many have been attempted by the weak and ignorant, as well as by the strong and learned ; but it still stands, and will stand, like Hahnemann, its immortal founder, who, though persecuted and ridiculed, is still, in his old age, a monument of truth, of learning, and of greatness, revered by all who know him, as the greatest benefactor of the human race, and destined, in future years, to be held in still greater reverence, not with that superstitious feeling which encompassed the great and good men of olden times, but with that truly free and enlightened feeling which characterizes the present times, in which free inquiry and uncompromising assent to what is true and just, are making rapid strides, and superstitious error, and a slavish yielding to dictation, are passing away.

"In conclusion, the Translator would merely remark, that he has taken some liberties with the text, by making additions where he perceived a deficiency, and adding some entire articles, for which he is chiefly indebted to the United States Dispensatory, and the Encyclopedia of Plants. He hopes the profession will find the work of some value, and that it will be particularly so to the country practitioner, who is frequently obliged to prepare his own medicines, and carry out his own dilutions. The work may be considered as a fundamental one, and should be in the library of every Homœopathic practitioner."

EDITORIAL NOTICE.

We greet our patrons in presenting them the first numbers of our third volume, with many congratulations on the cheering progress which the good cause has made during the long interval which the heavy hand of disease has imposed between us and them.

Grateful to the Divine Providence for the preservation of a life, which, by an excess of mental and bodily labours, we had most imprudently, very deeply endangered, we pledge our renewed strength to the continuance of our editorial functions; and however humble the results may prove to be, we feel that the zeal for Homœopathia which has been our impulse heretofore, ought to be infallibly strengthened by the debt which it has imposed on us, by lending its potent and exact aid in our dark and almost hopeless hours of personal peril.

We shall strive to pay that debt by seeking to extend the benefits we have enjoyed, to the bed-side of the sick of all coming time. And for this good purpose we take great pleasure in assuring our readers and the friends of the system generally, that the resources from which we are to draw our productions, have been greatly enriched during our illness, by the labours of both foreign and domestic adherents of our school. Even the venerable Hahnemann is about to give new and important contributions to the archives of the Reformation, he has so ably sustained for nearly sixty years. His eldest and ablest disciples are yet busy, and from many of them our readers may expect to hear before the close of this volume.

We take this occasion to renew the acknowledgement which we made near the close of the second volume, of the obligation we are under to Dr. Gray, who has, throughout all the work, largely contributed to the editorial labours.

HOMŒOPATHIC LITERATURE.

32. Homœopathy, and its kindred delusions: two lectures delivered before the Boston society for the diffusion of useful knowledge, by Oliver Wendell Holmes, M. D.

Καπνου σκιᾶς ὄναρ.

Boston: William D. Ticknor, 1842.

33. *Homœopathy*, with particular reference to a lecture by O. W. Holmes, M. D., by A. H. Okie, M. D.

"*Post tenebras lux.*"

34. An answer to the "Homœopathic delusions" of Dr. Oliver Wendell Holmes.

Καπνου σκιᾶς ὄναρ.

By Charles Neidhard, M. D.

Οὐκ ὄναρ ἀλλ' ἔπαρ.

35. *Some Remarks* on Dr. O. W. Holmes' "Lectures on Homœopathy, and its kindred delusions," by Robert Wesselhoeft, Homœopathic physician in Cambridge.

"Many are called, but few are chosen."

Matt. xxii. 14.

36. A Popular View of Homœopathy, by the Rev. Thomas R. Everest, Rector of Wickwar. From the second London edition. With annotations, and a brief survey of the progress and present state of Homœopathia in Europe. By A. Gerald Hull, M. D. New York: Wm. Radde, 322 Broadway.

ALLOPATHIC LITERATURE.

ENCHIRIDION MEDICUM: or Manual of the Practice of Medicine, the result of fifty years' experience, by C. W. Hufeland, Counsellor of State, physician in ordinary to the late king of Prussia, Professor in the University of Berlin. From the sixth German edition. Translated by Caspar Bruchhausen, M. S. Revised for the proprietor, by Robert Nelson, M. D., New York: Wm. Radde, 322 Broadway, 1842.

THE
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VOL. 3.

HAHNEMANN

ON

CHRONIC DISEASES.

No. I.

Hahnemann produced his latest, and probably his last book, the essay on Chronic Maladies, in 1828, fourteen years ago this autumn. Its appearance was the signal for renewed attacks of malignant ridicule from all quarters of the medical world. He was charged with quackery, for having kept his views on this subject secret a number of years, and with impiety, blasphemy even, for saying that he was the humble instrument of the beneficent Providence in making it known!—A Hamburg jew styled him the "Pseudo Messias Scabiosus," and his book, with this pious title, ran through several editions rapidly: so eager were the mad medical multitude to call down stones from heaven on the head of the offending old man! From that day to this, notwithstanding the incalculable benefits which even his opponents have derived from this deep inquiry into the appreciable nature of the most deadly of Chronic Maladies—those which under the best diet and regimen, and under the most cheerful moral circumstances,

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go on and on till their victims find a premature grave, no other return for his long and patient toils has greeted him from the great medical world than one universal demoniac storm of hate and ridicule.

The most popular professor of the greatest Medical school in the world, does not hesitate to teach in his lectures and writings the identical doctrine of Hahnemann, concerning the causes of dropsies, consumption, neuralgy, etc. but he takes good care not to name the real author of these important discoveries.—(Schoenlein of Berlin.)

Distinguished morbid Anatomists have become so by discovering that the internal surfaces are often affected by eruptions of various kinds; but they do not tell their admiring friends whose profound researches and comprehensive genius pointed them to the paths of truth, which they have perverted to the avenues of meretricious fame and wealth. Even so it was with the other great original proposition of Hahnemann, the founding of a pure *Materia Medica*, on the results of drugs applied to persons in health; numbers became renowned great men in the world by following this track, who never have mentioned Hahnemann but to cover his name with infamous reproaches, and his practice with remorseless sarcasms. (Jahn is their type.)

The storm which the great work on Chronic Diseases excited, served also to frighten some who had joined the Homœopathic ranks, into a public denial of his merits; these confirm

with many oaths their "I know not the man!" (Simpson, Griesselich, et id genus omne.)

But the day of reckoning on this side of the grave is coming, as surely and resistlessly as that which is beyond. The events in the world of science, which foretell the near approach of a new era in the philosophy of Life, are hurtling by us like birds of night in the thicker darkness which precedes the dawn of morning.

We implore all who care for the cure of diseases, and for the preservation of conscience among men, to remember that ridicule is not testimony, that sarcasm is not argument, that falsehood, however concealed, or apparently well employed, cannot terminate in honorable demonstration; for the hour is fast approaching when all these instruments of wrong and error will certainly recoil upon those who wield them against a man and a system founded in charity and truth.

To those who, panic-stricken by an overpowering public opinion, have suppressed the sentiments of affectionate reverence which some acquaintance with Hahnemann had awakened in them, and have talked of his "absurdities" and "charlatanism" to show the persecutors that they are not of his disciples, we have only a right to ask of them careful and upright reflection, before the hour arrives when even Pilate shall say: "I find no fault in this man."

* * * * *

The idea which seems to have struck Hahnemann with initiatory force, in his inquiries respecting the true Chronic Maladies, those which never wholly disappear of themselves, from the organism of an infected individual was the opposite characteristic of certain acute diseases, smallpox, measles, scarlet fever, hooping cough, etc. Both classes are produced by unknown elements, which have by common consent been called miasms. The division of the various human miasmata

into two classes, the (1) acute, those which run rapidly through certain defined stages of progress, and then wholly depart from the body; and (2) those which develop themselves slowly and irregularly, as to time and stages, and which continue to poison and disturb the organs and functions of the body, in a greater or less degree to the end of its existence, is peculiar to Hahnemann, and constitutes his first cardinal position. In this class he found but three original miasmata, viz. psora, syphilis, and sycosis. All those deviations from health produced by external noxious agents, as malaria, tobacco, alcoholic potions, badly ventilated dwellings, etc., are not included in Hahnemann's definition of chronic diseases. Health returns in these cases after indefinite periods, on removing the disturbing circumstance; wherefore the maladies they create are not self-sustaining, or real chronic diseases.

The same is also the case with the manifold injuries which the health of society in many countries sustains from improper food, pernicious habits of dress, and prevailing moral and physical evil practices. All these injurious conditions without the secret or manifest presence of one of the miasms above named, acting on the healthy organism, excite maladies which require only their absence to cease of themselves; or at worst they are not to be classed with the real chronic diseases, nor treated as such. With this important restriction in view, (one which necessarily grows out of Hahnemann's definition of a chronic disease,) we readily see how the mistakes of his superficial readers may be made stalking horses to serve as points of attack upon his whole theory on this great subject. In saying that, of the three real miasms which do not of themselves leave the individuals affected by them, nor their offspring forever, the itch is much more widely extended in the civilized world than both the others, Hahnemann has, it

appears to us, by no means made a foolish assertion. No medical man will deny that many subjects are affected with primary itch, for every one affected either with primary syphilis or gonorrhœa; certainly few will be bold enough to say that the proportion cannot be less than as ten to one. And yet is Hahnemann hooted at as an audacious simpleton, in every public school of physic, and reviled as something worse in almost every second newspaper of the world, for saying that not less than seven-eighths of the real chronic maladies, are descendants from psoric contact.

Again, no one at this day thinks of confounding the poison of lues with that of gonorrhœa, or of doubting that all the forms of each may grow up in different constitutions from one act of contagion, i. e. proceed from one drop of the virus of each, successively transmitted. And yet not one of the old school blushes to call that man a quack and an impostor, who first taught us how to distinguish clearly the secondary and ternary forms of these two great poisons from each other; and who has faithfully endeavored to show us how to cure the secondary and ternary forms of the gonorrhœic virus, an attempt in which he is not only the sole pioneer, but as yet, I fear, the sole intelligent traveller. Hahnemann is the first to inform the world that from gonorrhœa fatal destructions of the nasal bones may arise, in which the antidote to syphilis is worse than useless! He is the first to teach the world how the excrescences, falsely called venereal warts, may be safely and durably cured, without escharotics.

For which of these great discoveries is he called by the presumptuous upstarts in Philadelphia, a vagabond nostrum monger?

According to Hahnemann it is equally as preposterous to attempt the extirpation of either syphilis, sycosis, or psora, by local applications; escharotics, astringents, etc., as it would be to try to extinguish the vaccine or

the variolous disease by a similar process. The single pustules thus treated may be destroyed, but the internal malady of which these are merely the external utterings, would certainly not be annihilated—far, very far from it. If all the pustulous manifestations in either case could be fully suppressed, I entertain little doubt of the fact that fatal consequences would ensue in nearly every such case. It is very certain that all the cases of secondary syphilis (at least all that I have seen) are the results of the topical treatment of chancres. The experience of the profession should long since have taught it to respect the solemn warnings of the despised old German sage, respecting the infallible evils of a merely topical treatment of syphilis. Nor will his voice of energetic denunciation against all local cures of eruptions, be forever unheeded—the profession will be compelled to respect them, even by the populace, if they will not otherwise attend to so great a truth.

Below we attach the proofs which Hahnemann has collected from the wide records of our venerable literature, for his second great position; that the itch when restricted in its primary expression on the skin, will affect the interior organs of the body in a much more serious manner.

It is to be observed that various eruptions on the skin are classed by Hahnemann under the general head of psora, which hitherto have been regarded as essentially distinct diseases. His reasons for this will partly appear on perusal of the following extracts; but how far the position ought to be respected as universally true, must depend on future observation.

The extracts which follow are taken from a translation of the whole work, by GEDDES M. SCOTT, M. D., of Glasgow, Scotland. Dr. Scott has placed the entire manuscript at our disposal, and it is our intention to publish it during the current year.

ASTHMA.—Lentilius, *Miscell. med. pract.* Tom. I. S. 176.—Fr. Hoffmann, *Abh. v. d. Kinderkrankheiten*, Frft. 1741. S. 104.—Detharding, in *Append. ad Ephem. Nat. Cur. Dec. III. ann. 5. et 6. et in obs. parallel. ad obs. 58.*—Binninger, *Obs. Cent. V. obs. 88.*—Morgagni, *de sedibus et caus. morb. Epist. XIV. 35.*—*Acta Nat. Cur. Tom. V. obs. 47.*—J. Juncker, *Consp. ther. spec. tab. 31.*—F. H. L. Muzell, *Wahrnehm. Samml. II. Cas. 8. (1)*—J. Fr. Gmelin in *Gesners Samml. v. Beob. V. S. 21. (2)*—Hundertmark—Zieger, *Diss. de scabie artificiali*, Lips. 1758. S. 32. (3)—Beireis—Stammen, *Diss. de causis cum in*

primis plebs scabie laboret. Helmst. 1792. S. 26. (4)—Pelargus (Storch), *Obs. clin. Jahrg. 1722. Seite 435 bis 438. (5)*—Breslauer *Samml. vom Jahre 1727. S. 293. (6)*—Riedlin der Vater, *Obs. Cent. II. obs. 90.* Augsburg 1691. (7)

(1) A man between 30 and 40 years of age had a long time before had the itch, which had been dispelled by frictions. From that time he became gradually and increasingly subject to asthma: at length his respiration, even when he was at rest, became extremely short and painful, accompanied with a kind of continual wheezing, but without cough. He was ordered an injection with a drachm of squill, and to take three grs. of squill in powder. But a mistake was committed, and the drachm of squill was introduced into his stomach: the life of the patient was in danger; he experienced frightful pain, with dreadful efforts at vomiting; but soon after a copious eruption of itch reappeared on his hands, feet, and the whole body, which suddenly put an end to the asthma.

(2) To a violent asthma were joined a general swelling and fever.

(3) A man aged 32 had been cured of itch by frictions with an ointment: he was then tormented for eleven months with the most violent asthma till the continued use for twenty-three days of the sap of the birch tree at length restored the exanthem.

(4) A student caught the itch when on the point of going to a ball, and procured the removal of it by a physician in the quickest possible manner, by means of an antipsoric ointment; but he was soon after affected with an asthma of such severity that he could only breathe when his head was raised, and during the paroxysms he was almost suffocated. After having thus struggled for an hour, he expectorated, by coughing, small cartilaginous masses, which afforded speedy relief. On returning to his native town he experienced every evening for two years without interruption ten attacks of this disease on which the skill of Dr. Beiereis could produce no effect.

(5) A boy of 13 years, affected with ringworm from his infancy, was cured of it by his mother: eight or ten days afterwards he was seized with asthma, with violent pains in the limbs, the back and the knees, and was only cured, at the end of a month, by the appearance of a psoric eruption over the whole body.

(6) A ringworm, with which a little girl was affected, was suppressed by purgatives and other internal medicines. The child immediately experienced oppression of the chest, cough, and great weakness. Her restoration, in other respects rapid enough, did not take place till, owing to the interruption of remedies, the ringworm reappeared.

(7) A boy of 5 years old had for a long time been affected with itch. This eruption having been suppressed by an ointment, the child remained affected with profound melancholy and cough.

SUFFOCATING CATARRH.—Ehrenfr. Hagedorn, *hist. med. phys. Cent. I. hist. 8. 9.*(8)—Pelargus, *a. a. O. Jahrg. 1723. S. 15.*(9)—Hundertmark, *a. a. O. S. 33.*(10)

ASTHMATIC SUFFOCATIONS.—Joh. Phil. Brendel, *Consilia med. Frft. 1615. Cons. 73.*
—Ephem. *Nat. Cur. Ann. II. obs. 313.*
—Wilh. Fabr. *v. Hilden, Obs. Cent.*

III. obs. 39.(11)—Ph. R. Vicat, *Obs. pract. obs. 35. Vitoduri, 1780.*(12)—J. J. Waldschmid, *Opera, S. 244.*(13)

ASTHMA WITH GENERAL SWELLING.—Waldschmid, *a. a. O. —Höchstetter, Obs. Dec. III. obs. 7. Frft. et Lips. 1674. S. 248.*—Pelargus, *a. a. O. Jahrg. 1723. S. 504.*(14)—Riedlin der Vater, *a. a. O. Obs. 91.*(15)

ASTHMA AND HYDROTHORAX.—Storch, in *Act. Nat. Cur. Tom.V. obs. 147.*—Morgagni, *de sed. et causis morb. XVI.*

(8) A scald-head suppressed by anointing with oil of sweet almonds gave place to extreme weakness in all the limbs, pain on one side of the head, loss of appetite, asthma, waking with a start at night, suffocating catarrh with stertorous and wheezing respiration, convulsions in the limbs, as in the act of death, and bloody urine. The re-establishment of the scald-head cured all these affections.

A little girl 3 years old had for several weeks been affected with itch, which had been suppressed by means of an ointment: the next day the child was seized with whooping cough, stertor, numbness and cold of the entire body, symptoms which did not cease till the reappearance of the itch.

(9) A young girl, 12 years old, had been relieved of a copious itch by frictions with a pomatum, after which she experienced an acute fever with suffocating cough, asthma, swelling, and subsequently stitch in the side. Six days afterwards, an internal medicine containing sulphur recalled the itch, and the evils disappeared, except the swelling; but at the end of twenty-four days the itch dried up, a new inflammation of the chest appeared with stitch and vomiting.

(10) A man, aged 36 years, who had been sixteen months before relieved of itch by an ointment of lead and mercury, became subject from that time to a violent spasmodic cough accompanied with great anxiety.

(11) A young man experienced such oppression of the chest in consequence of the repercussion of the itch, that he could not breathe the air, and his pulse became scarcely perceptible. Death took place by suffocation.

(12) A moist tetter in the left arm of a young man of 19, disappeared after the employment of many topical remedies, but there soon after ensued a periodical asthma, which was increased by a long journey on foot during the heat of summer, so as to threaten suffocation, with swelling and blueness of the face, quickness, weakness, and inequality of the pulse.

(13) The oppressions of the chest occasioned by the repercussion of the itch increased so much as to suffocate the patient.

(14) A girl, aged 15, had for some time a copious itch which dried of itself. A short time after, she was seized with drowsiness and weakness; her respiration became short: the next day the asthma continued and the belly swelled.

(15) A peasant, aged 50, who had been affected with itch a long time, was at length freed by a local application, during the action of which he was seized with a great difficulty of breathing, loss of appetite, and swelling of the whole body.

art. 34.(16)—Richard, Recueil d'observ. de Méd. Tom. III. S. 308. à Paris 1772.—Hagendorn, a. a. O. Cent. II. hist. 15.(17)

PLEURISY AND INFLAMMATION OF THE CHEST.

—Pelargus, a. a. O. S. 10.(18)—Hagendorn, a. a. O. Cent. III. hist. 58.—Giseke, Hamb. Abhandl. S. 310.—Richard, a. a. O.—Pelargus, a. a. O. Jahrg. 1721. S. 23 und 114.(19) und Jahrg. 1723. S. 29.(20) und Jahrg.

(16) A young woman was cured of the itch by an ointment, and became immediately a prey to the most violent asthma without fever. After having been twice bled, her strength was so exhausted and the asthma so increased that she died the same day. The whole chest was full of a bluish serosity, as well as the pericardium.

(17) The suppression of scald-head in the case of a girl 9 years of age occasioned a slow fever, with general swelling and difficulty of breathing which was only cured by the reappearance of the scald-head.

(18) An itch which had long affected a man, aged 46, was removed by a pomatum containing sulphur. The patient became immediately subject to hæmoptysis, difficult and short respiration. The next day the heat and anxiety became almost insupportable, and the third day, the pains of the chest had augmented. A profuse sweat then appeared. At the end of fifteen days the itch reappeared and the patient was better; however, he had a relapse; the itch dried up and he died thirteen days after this new accession.

(19) A thin man died of inflammation of the chest and other symptoms, twenty days after the repercussion of the itch, with which he was affected.

(20) A boy of 7 years with whom the scald-head and itch dried spontaneously,

1722. S. 459.(21)—Sennert, praxis med. lib. II. P. III. Cap. 6. S. 380.—Jerzembski, Diss. Scabies salubris in hydropse. Halae. 1777.(22)

PLEURISY AND COUGH.—Pelargus, a. a. O. Jahrg. 1722. S. 79.(23)

VIOLENT COUGH.—Richard, a. a. O.—Juncker, Conspect. med. theor. et pract. tab. 76.

HÆMOPTYSIS.—Phil. Georg Schroeder, Opusc. II. S. 322.—Richard, a. a. O.—Binniger, Obs. Cent. V. Obs. 88.

HÆMOPTYSIS AND CONSUMPTION.—Chn.

Max. Spener, Diss. de aegro febris maligna, phthisi complicata laborante. Giess. 1699. (24)—Bagliv, Opera. S. 215.—Sicelius, Praxis casual. Exerc. III. cas. 1. Frft. et Lips. 1743.(25) —

died in four days of an acute fever and humid asthma.

(21) A young man who had cured himself of itch by an ointment containing lead, died four days afterwards of disease of the chest.

(22) A general dropsy was rapidly cured by the reappearance of the itch, which having been again suppressed by a great chill, death ensued three days afterwards in consequence of a stitch in the side, (pleurisy?)

(23) A child aged 13 who was treated for the itch with drying remedies, was affected with cough and stitches in the chest, which disappeared, when the itch returned to the skin.

(24) A young man of 18 had cured himself of itch by means of a blackish colored lotion. Some days after, he was seized with cold and heat, lowness of spirits, precordial anxiety, headache, nausea, violent thirst, cough, impeded respiration; he spat blood and became delirious; his face became livid and his features changed. The urine acquired a deep red color without sediment.

(25) The symptoms were presented in the

Morgagni, a. a. O. XXI., art. 32.(26)
—Unzers Arzt. CCC. Seite 508.(27)

COLLECTIONS OF PUS IN THE CHEST.—F. A. Waitz, medic.-chir. Aufsätze, Th. I. S. 114. 115.(28)—Preval, im Journal de Médec. LXL S. 491.

COLLECTIONS OF PUS IN THE MESENTERY.—Krause—Schubert, Diss. de scabie humana. Lips. 1779. S. 23.(29)

GREAT DISORGANIZATION OF VARIOUS VISCERA.—J. H. Schulze, in Act. Nat. Cur. Tom. I. obs. 231.(30)

CEREBRAL DEGENERATION.—Diemenbroek, Obs. et Curat. med. obs. 60.—Bonet,

case of a young man, in whom the itch had been cured by a mercurial ointment.

(26) An itch which had disappeared spontaneously, occasioned a slow fever and a fatal expectoration of pus. On dissection the left lung was found full of pus.

(27) A young man, apparently robust, being about to preach, and being consequently desirous of removing an itch with which he had long been affected, rubbed himself in the morning with an antipsoric ointment. At the end of some hours after dinner he died, having experienced anxiety, difficult respiration, and tenesmus. A post mortem examination showed that the whole lungs were full of liquid pus.

(28) The case is one of empyema, owing to the patient having removed by internal remedies an itch, which had appeared some years before.

(29) A young man whose physician dissuaded from the employment of an ointment containing sulphur, against an itch which had relapsed, refused compliance with the advice: he used frictions, and died afterwards of constipation. On inspection several purulent collections were found in the mesentery.

(30) In this subject also the diaphragm and liver were diseased.

Sepulchretum anat. Sect. IV. obs. 1. §. 1.(31) und §. 2.(32)—J. H. Schulze, a. a. O.

HYDROCEPHALUS.—Acta helvet. V. S. 190.

ULCERS IN THE STOMACH.—L. Chn. Juncker, Diss. de scabie repulsa, Hal. 1750. S. 16.(33)

SPHACELUS OF THE STOMACH AND DUODENUM.—Hundertmark, a. a. O. S. 29.(34)

GENERAL DROPSY.(35)

(31) A child aged two years died of a repressed scald-head; on inspection much bloody serosity was found under the cranium.

(32) A woman died after having removed scald head by lotions. One half of the brain was found putrified, and full of yellow ichor.

(33) A middle aged man of a bilious-sanguine temperament, was afflicted with gouty pains in the abdomen, and also with stone. After the gout had been dispelled by various means, the itch broke out, but it was opposed by a drying bath of tan; there then ensued an ulcer in the stomach, which accelerated the death of the patient, as was found on inspection.

(34) A boy of 7 weeks, and a young man of 18 years old, died shortly after the itch had been repelled by an ointment containing sulphur. In the first, the superior part of the stomach immediately below the cardia, and in the other the portion of the duodenum, into which the ductus choledochus and pancreaticus enter, were found destroyed by gangrene. A similar inflammation of the stomach, terminating fatally in a laboring man, had been produced by a repressed itch.

(35) Innumerable examples of this are found in many authors, among whom I shall only cite J. D. Fick. (Exercitatio Med. de scabie repulsa, Halle 1710, § 6.) This physician speaks of an itch, which, having been treated by mercurials, left, as its consequence, a general

ASCITES, Richard, a. a. O. und bei mehreren Beobachtern.

SWELLING OF THE SCROTUM IN BOYS.—Fr. Hoffmann, *Med. rat. syst.* III. S. 175.

RED SWELLING OF THE WHOLE BODY.—Lentilius, *Misc. med. pract.* Tom. I. S. 176.

JAUNDICE.—Baldinger, *Krankheiten ein. Armees.* S. 226.—Joh. Rud. Camerarius, *Memorab. Cent. X.* § 65.

SWELLING OF THE PAROTID GLANDS.—Barette im *Journal de Méd.* XVIII. S. 169.

SWELLING OF THE CERVICAL GLANDS.—Pellargus, a. a. O. Jahrg. 1723. S. 593.(36)
—Unzer, *Arzt. Th.* VI. St. 301.(37)

dropsy, of which the patient was relieved only by the reappearance of the exanthem.

The author of a book which bears the name of Hippocrates, (*Epidemion lib. 5, No. 4.*) is the first to speak of this distressing termination. An Athenian was affected with a considerable exanthem, itching, somewhat like leprosy, spread over the whole body, particularly the genital organs. He was freed of it by using the warm baths of the island of Melos, but was then seized with dropsy, of which he died.

(36) A boy 8 or 9 years old, recently cured of a scald-head, had a great number of swelled glands in the neck, which consequently appeared quite deformed, and stiff.

(37) A young man, aged 14, had the itch, which he removed by friction with a gray ointment. Some time afterwards glandular swellings appeared behind each ear, of which that on the left dispersed spontaneously, but that on the right attained an enormous size in the space of five months, and began soon to be painful. All the glands of the neck were swelled. Externally the large tumour was hard and insensible, but the patient experienced dull pain internally, especially during

DIMNESS OF SIGHT AND PRESBYOPIA.—Fr. Hoffmann, *Consult. med.* I. cas. 50.(38)

OPHTHALMIA.—G. W. Wedel.—Snetter, *Diss. de Ophthalmia.* Jen. 1713.—Hallmann, in *Konigl. Vetenskaps Handl.* f. A. X. 1776. S. 210.(39)—G. Chph. Schiller, *de scabie humida*, S. 42. Erford. 1747.

the night. In addition to which he breathed and swallowed with difficulty. All the means employed to promote suppuration failed; it was so large that it suffocated the patient six months after its appearance.

(38) A girl aged 13 had the itch, particularly in the limbs, the face, and the genital organs. It was removed at length by ointments containing zinc and sulphur. Immediately afterwards her sight became gradually weak. Dark bodies passed before the eyes, which were seen from without, floating in the aqueous humour of the anterior chamber. At the same time the young person could not distinguish small objects without the aid of glasses. The pupils were dilated.

(39) A young woman had an abundant psoric eruption on the legs, with large ulcers below the ham. The smallpox with which she became infected, freed her from this exanthem. There ensued during two years a moist inflammation of the whole of the eye, and of the eyelid, with itching and ulceration, and the perception of dark bodies moving before the eyes. The patient wore for three days the woollen stockings of a child infected with itch. The last day she was seized with fever, accompanied with dry cough, tension in the chest, and tendency to vomit. The next day the fever and disorder of the chest diminished, on the appearance of a sweat, during which both legs were affected with erysipelas, which degenerated from the second day into a real itch. The sight improved.

CATARACT.—Chn. Gottlieb Ludwig, *Advers. med.* Tom. II. S. 157.(40)

AMAUROSIS.—Northof, *Diss. de scabie*, Gott-
ing. 1792. S. 10.(41)—Chn. G. Ludwig,
a. a. O.(42)—Sennert, *prax. lib.* III.
Sect. 2. Cap. 44.—Trecourt, *chirurg.*
Wahrnehmungen. S. 173. Leipz. 1777.
—Fabricius ab Hilden, *Cent.* II. obs.
39.(43)

DEAFNESS.—Thore in Capelle, *Journ. de santé*,
Tom. I.—Daniel, *Syst. aegritud.* II. S.
228.—Ludwig, a. a. O.

ENTERITIS.—Hundertmark, *Diss. de scabie*
artificiali. Lips. 1758. S. 29.

HÆMORRHOIDS, HÆMORRHAGE OF THE REC-
TUM.—Acta helvet. V. S. 192.(44)—
Daniel, *Syst. aegritud.* II. S. 245.(45)

PAINS IN THE LOWER BELLY.—Fr. Hoffman,
Med. rat. syst. III. S. 177.(46)

DIABETES.—Comment. Lips. XIV. S. 365.—

(40) A man in whom the psoric eruption
had been removed, and who was in other re-
spects robust, became affected with cataract.

(41) A repelled itch excited amaurosis,
which ceased on the reappearance of the ex-
anthem.

(42) A robust man who had been treated
for the itch, by re-percussion became affected
with gutta serena, and remained blind till
death, which took place at an advanced age.

(43) Amaurosis produced by the same cause,
and accompanied with frightful headache.

(44) The loss of blood from the anus re-
turned every month.

(45) The suppression of an external itch
was succeeded by a loss of eight pounds of
blood in some hours, pain in the belly, fever,
&c., &c.

(46) The repression of the itch produced
the most violent colic, pains in the region of
the left false ribs, agitation, slow fever, anxie-
ty, and obstinate constipation.

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Eph. Nat. Cur. Dec. II. ann. 10. S. 162.

—C. Weber, *Obs. f. I.* S. 62.

SUPPRESSION OF URINE.—Sennert, *Prax. lib.* 3.
S. 8.—Morgagni, a. a. O. XLI. art.
2.(47)

ERYSIPELAS.—Unzer, *Arzt, Th.* V. St.
301.(48)

ACRID, ICHOROUS DISCHARGES.—Fr. Hoff-
mann, *Consult.* Tom. II. Cass. 125.

ULCERS.—Unzer, *Arzt. Th.* V. St. 301.(49)—
Pelargus, a. a. O. Jahrg. 1723. Seite
673 (50) — Breslauer Samml. 1727.

(47) A young peasant was freed from the
itch by means of an ointment. A short time
afterwards he was attacked by suppression of
urine, vomiting, and sometimes pain in the
left hypochondriac region. He made water,
however, several times, but in small quanti-
ties, passing with pain very dark coloured
urine. A fruitless attempt was made to empty
the bladder, by means of the catheter. At
length the whole body swelled, the respiration
became slow and laborious, and the patient
died the twenty-first day after the disappear-
ance of the itch. The bladder contained two
pounds of very dark-colored urine, and the
abdomen a serous fluid, which, after having
been placed for some time on the fire, thick-
ened, and assumed the appearance of the white
of egg.

(48) A man affected with itch rubbed him-
self with a mercurial ointment; there ensued
an erysipelatus inflammation at the nape of
the neck, which occasioned death at the end
of five weeks.

(49) A woman who had made use of mer-
curial ointment against the itch, was affected
with putrid leprosy over the whole body,
which came off in entire flakes in a putrified
state. She died in great pain in the course of
some days.

(50) A young man aged 16 had had the

Seite 107.(51)—Muzell, Wahrnehm. II. Cas. 6.(52)—Riedlin der Sohn, Cent. obs. 38.(53)—Alberti—Gorn, Diss. de scabie, S. 24. Hal. 1718.

CARIES OF THE BONES.—Richard, a. a. O.

OSSEOUS SWELLING OF THE KNEE.—Valsalva bei Morgagni de sed. et caus. morb. I. art. 13.

PAINS IN THE BONES. — Hamburger Magaz. XVIII. S. 3. 253.

RACHITIS AND MARASMUS INFANTILIS.—Fr. Hoffmann, Kinderkrankh. Leipz. 1741. S. 132.

FEVER. — B. V. Faventinus, Medicina empir. S. 260.—Ramazzini, Constit. epid. urbis. II. No. 32. 1691.(54) — J. C.

itch for some time ; it disappeared, and there ensued ulcers on the legs.

(51) Frictions employed against the itch, were followed, in the case of a man aged 50 years, by severe pains in the left axilla, which lasted for five weeks, at the end of which several ulcers appeared in the axilla.

(52) A charlatan administered a psoric ointment to a young student : the itch with which he had been affected was removed, but there appeared an ulcer in the mouth which proved incurable.

(53) A student long affected with itch, cured himself by means of an ointment, and was then affected with ulcers on the arms and legs, and swelling of the axillary glands. The ulcers became cicatrized under the influence of external remedies, but the patient was attacked by asthma, and subsequently by dropsy, of which he died.

(54) In the work referred to are found many cases in which the itch, having been checked by ointments, was followed by fever, accompanied by blackish urine, and in which, when the exanthem reappeared, the fever ceased, and the urine regained its natural appearance.

Carl, in Act. Nat. Cur. VI. obs. 16.(55)

FEVER—Reil, Memorab. Fasc. III. S. 169.(56)

—Pelargus, a. a. O. Jahrg. 1721. Seite

267.(57) und ebend. Jahrg. 1723.(58)

—Amatus, Lusit. Cent. II. Cur. 33.—

Schiller, Diss. de scabie humida. Er-

ford. 1747. S. 44.(59)—J. J. Fick, Ex-

ercitatio med. de scabie retropulsa.

Hal. 1710. §. 2.(60)—Pelargus, a. a. O.

(55) A man and woman had for a long time had itch in their hands, the desiccation of which had been followed on each occasion by fever, which only ceased on the return of the exanthem. The itch, however, was limited to a small part of the body, and neither of the two patients opposed it by external means.

(56) Scabies febre suborta supprimitur, remota febre redit.

(57) A child aged 9 years, affected by scald-head, had been treated by its mother with ointments. The disease disappeared, but a violent fever ensued.

(58) A child of a year old had for some time had scald-head, and an eruption on the face, both of which had dried up ; he was shortly afterwards seized with heat, cough and diarrhœa. The return of the exanthem to the head, re-established his health.

(59) A woman aged 43, long tormented by a dry itch, rubbed her joints with an ointment of sulphur and mercury : the itch disappeared, but there ensued pains under the right ribs, weakness in all the limbs, heat, and feverish excitement. After employing sudorifics for sixteen days, large psoric pustules broke out over the whole body.

(60) Two young brothers cured themselves of the itch by the same means ; but they entirely lost appetite, were seized with dry cough and slow fever, became emaciated, and fell into somnolence and stupor. When threat-

Jahrg. 1722. S. 122.(61)—auch Jahrg. 1723. S. 10.—auch Jahrg. 1723. S. 14.(62) und S. 291.—C. G. Ludwig, *Advers. med.* II. S. 157 bis 160.(63).—Morgagni, a. a. O. X. art. 9.(64) XXI. art. 31.(65) XXXVIII. art. 22.(66) LV. art. 3.(67)

ened with death, the exanthem fortunately reappeared.

(61) On the spontaneous disappearance of scald-head, in a child aged 3 years, there ensued a violent catarrhal fever, with cough and lassitude, and the child was not cured till the reappearance of the exanthem.

(62) A maker of purses being about to make an embroidered article, employed a saturnine ointment for the cure of a copious itch. Scarcely was the exanthem dry, when he was seized with shivering, heat, difficulty of respiration, and loud cough: the patient died of suffocation on the fourth day.

(63) A vigorous and healthy man, aged 30 years, caught the itch, and repelled it. He was then seized with a catarrhal fever, accompanied by excessive sweats, but he was recovering slowly, when another fever occurred without any known cause. The paroxysms began by anxiety and headache, and increased with heat, quickness of pulse and morning sweats. To these symptoms were added an extreme loss of strength and delirium, great agitation, sighing respiration, with suffocation, and the disease terminated fatally, notwithstanding the remedies employed.

(64) Fever ensued on the spontaneous disappearance of the itch in the case of a young boy. The itch then returned with increased intensity, and the fever ceased; but the child became thin, and the eruption having dried up afresh, diarrhœa and convulsions supervened, which were speedily followed by death.

(65) A slow fever, purulent expectoration,

FEVER.—Lanzonus in *Eph. Nat. Cur. Dec.* III. ann. 9 et 10. Obs. 16 und 113.—Höchstetter, *Obs. med. Dec.* VIII. Cas. 8.(68)—Triller—Wehle, *Diss. nullam medicinam interdum esse optimam*, Witemb. 1754.(69)—Fick, a. a. O. §. 1.

and death, followed the spontaneous disappearance of the itch. On inspection the left lung was found full of pus.

(66) A woman aged 30 years had for a long time had pains in the limbs and an abundant psoric eruption, which she removed by means of an ointment. A fever immediately ensued, with intense heat, thirst, and intolerable headache, to which symptoms were united delirium, distressing asthma, œdema of the whole body, and extreme swelling of the belly. She died on the 6th day. The abdomen contained only air, and one half of that cavity was occupied by the stomach, distended by gas.

(67) A man in whom scald-head had been suppressed by exposure to severe cold, was seized after eight days with fever of a bad character, accompanied by vomiting, and subsequently hiccough. He died of this disease on the ninth day.

In the same article Morgagni relates the case of a man affected with psoric scabs on the limbs and other parts of the body, who removed this exanthem almost entirely, by wearing a shirt impregnated with sulphur, but who was immediately seized with drawing pains throughout the body, fever, preventing rest during the night, and motion during the day; even the tongue and pharynx participated in the affection. With great difficulty the exanthem was restored, which led to the re-establishment of health.

(68) A fever of bad character, with opisthotonus, was occasioned by the re-percussion of the itch.

(69) A young merchant having been freed

(70)—Waldschmid, Opera. S. 241.—Gerbizius in Eph. Nat. Cur. Dec. III. ann. 2. obs. 167.—Amatus Lusit. Cent. II. Curat. 33. (71)—Fr. Hoffmann, Med. rat. system. T. III. S. 175. (72)

TERTIAN INTERMITTENT FEVER.—Pelargus, a. a. O. Jahrg. 1722. S. 103. vergl. mit Seite 79. (73)—Juncker, a. a. O. tab. 79.

of the itch by means of an ointment, was suddenly seized with such hoarseness as to prevent speaking. There ensued dry asthma, disgust for food of every kind, violent and fatiguing cough, especially during the night, which was passed without sleep, profuse and foetid nocturnal sweats, and finally death, notwithstanding the utmost efforts of the physicians.

(70) A man aged 60 caught the itch, which occasioned him great suffering during the night: he employed without benefit a number of remedies, and at length, on the advice of a mendicant, a pretended specific compound of laurel oil, flowers of sulphur and hogslard; some frictions freed him from the itch, but he was soon after seized with violent febrile cold, followed by excessive heat over the whole body, inextinguishable thirst, short and wheezing respiration, sleeplessness, violent trembling over the whole body, and great weakness, followed by death on the fourth day.

(71) Fever, with mental alienation, ascribed to the same cause, and rapidly proving fatal.

(72) After the re-percussion of the itch the most frequent symptoms are, violent fevers, with considerable loss of strength. In one of these cases the fever lasted several days, when it was terminated by the reappearance of the itch.

(73) In a boy aged 15 years, who had for some time had scald-head, for which Pelargus prescribed a strong purgative, which was soon

—Eph. Nat. Cur. Dec. I. ann. 4.—Welsch, Obs. 15.—Sauvages, Spec. 11.—de Hautesierk, Obs. Tom. II. S. 300.—Comment. Lipsiensis XIX. S. 297.

QUARTAN INTERMITTENT FEVER.—Thom. Bartholinus, Cap. 4. hist. 35.—Sennert. Paralip. S. 116.—Fr. Hoffmann, Med. rat. system. III. S. 175. (74)

VERTIGO AND TOTAL PROSTRATION OF THE FORCES.—Gabelchofer, Obs. med. Cent. II. obs. 42.

EPILEPTIC VERTIGO.—Fr. Hoffmann, Consult. med. I. cas. 12. (75)

followed by pains in the back, and on micturition, and these by a tertian fever.

(74) Old persons are subject particularly to the dry itch, and when this is opposed by external remedies, it is commonly followed by a quartan fever, which ceases on the return of the itch.

(75) A man aged 75 had for three years a dry itch. He was cured of it, and enjoyed, apparently, good health for two years, in the course of which he experienced only two paroxysms of vertigo, which gradually augmented to such a degree, that on one occasion, on leaving the table, he would have fallen had he not been supported. His body was covered with cold sweat, his limbs trembled, all the parts were as if dead, and he had frequent acid vomitings. A similar paroxysm returned six weeks afterwards, and then monthly, for three months. While they lasted, the patient did not lose consciousness, but after each attack he experienced heaviness and a species of dulness like that occasioned by drunkenness. The attacks at length returned every day, but less severe. The patient could neither read nor reflect, nor turn quickly round, nor bend the body forward: at the same time his spirits became depressed, gloomy thoughts

VERTIGINOUS EPILEPSY.—Fr. Hoffmann, a. a. O. S. 30.(76)

occupied him incessantly, and he sighed every moment.

(76) In the case of a woman aged 35 years, who had been cured of the itch some years previously, by means of mercurials, menstruation was very irregular, being often retarded from ten to fifteen weeks. She suffered at the same time habitual constipation. Four years before, during pregnancy, this woman had been seized with vertigo; she suddenly fell backwards when she was standing up or walking. While sitting she did not lose consciousness, notwithstanding the vertigo, which did not prevent her speaking, drinking, or eating. At the end of the paroxysm she was affected with a kind of creeping sensation, at first in the left foot, which degenerated into rapid movements of raising and depressing the foot. In the course of time, the attacks terminated by depriving her of all consciousness, and in a journey which she made in a carriage, she was seized with a true epilepsy, which afterwards returned three times in the course of the winter. She could not then speak, and though she did not turn her thumbs inwards, she foamed at the mouth. The creeping sensation in the left foot announced the paroxysm, which suddenly broke out when the sensation had reached the precordial region. The epilepsy was suppressed by five doses of a powder: but the vertigo reappeared though much weaker than formerly. Its premonitory symptom was, as formerly, a creeping sensation in the left foot, which rose to the heart; the patient then experienced much anxiety and fear, as if she were falling from a height, and while believing that she was actually so doing, she lost feeling and speech, and her limbs became agitated with convulsive movements. Even during the intervals, the

CONVULSIONS.—Juncker, a. a. O. tab. 53.—Hochstetter, Eph. Nat. Cur. Dec. 8. cas. 3.—Eph. Nat. Cur. Dec. 2. ann. 1. obs. 35. und ann. 5. obs. 224.—D. W. Triller—Welle, Diss. Nullam medicinam interdum esse optimam. Viteb. 1754. p. 13. 14.(77)—Sicelius, Decas Casuum I. Cas. 5.(78)—Pelargus, a. a. O. Jahrg. 1723. S. 545.(79)

EPILEPTIC JERKINGS, AND EPILEPSY.—J. C. Carl in Act. Nat. Cur. VI. obs. 16. (80)—E. Hagendorn, a. a. O. hist.

least contact of the foot caused an extremely acute pain. At the same time she experienced violent pains and heat in the head, and had lost her memory.

(77) After suppression of the itch by means of an ointment, a young woman fell into a most profound syncope, which was followed by frightful convulsions and death.

(78) A young woman aged 17 years, after the spontaneous disappearance of scald-head, was affected with constant heat in the head and paroxysms of headache; she, at times, jumped up as if she had been frightened; when awake, she had spasmodic movements in the limbs, especially the arms and hands, and precordial anxiety as if her chest were confined.

(79) The scald-head dried up in an adult, who, for some years previously, had had trembling in the hands. The patient then fell into extreme weakness, and red spots appeared over the body without heat. The trembling degenerated into convulsive starts; a bloody matter issued from the nose and ears—there was cough, with expectoration, and the patient died on the 23d day in convulsions.

(80) A man who had rubbed with an ointment an itch, to frequent returns of which he was subject, fell into epileptic convulsions, which ceased when the exanthem reappeared.

9.(81)—Fr. Hoffmann, Consult. med. I. cas. 31.(82)—Eben. Med. rat. syst. T. IV. P. III. Cap. 1. und in Kinderkrankheiten, S. 108.—Sauvages, Nosol. spec. 11.—de Hautesierk, Obs. T. II. S. 300.—Sennert, prax. III. Cap. 44.—Eph Nat. Cur. Dec. III. ann. 2. obs. 29.—Gruling, Obs. med. Cent. III. obs. 73.—Th. Bartholin, Cent. 3. hist. 20.—Fabr. de Hilden, Cent. III. obs. 10.(83)—Riedlin, lin. med. ann. 1696. Maj. obs. 1.(84)—Lentilius, Miscell. med. pr. P. I. S. 32.—G. W. Wedel, Diss. de aegro epileptico. Jen. 1673.(85)—Herrm. Grube, de Arcanis medicorum non arcanis, Hafn. 1673. S. 165.(86)—

Tulpius, Obs. lib. I. Cap. 8.(87)—Th. Thompson, Medic. Rathpflege, Leipzig 1779. S. 107. 108.(88)—Hundertmark, a. a. O. S. 32.(89)—Fr. Hoffmann, Consult. med. I. Cas. 28. S. 141.(90)

APOPLEXY.—Cummius in Eph. Nat. Cur. Dec. I. ann. 1. obs. 58.—Moebius, Institut. med. S. 65.—J. J. Wepfer, Histor. Apoplect. Amstel. 1724. S. 457.

(81) A young man aged 18, freed himself of the itch by a mercurial ointment. He was unexpectedly seized two months afterwards with spasm, affecting all the limbs, sometimes one, sometimes the other; with painful constriction of the chest and throat, cold in the extremities and great weakness. On the 4th day epilepsy supervened, with foaming at the mouth, during the paroxysms of which the limbs underwent singular contortions. This epilepsy only ceased on the recurrence of the itch.

(82) In the case of a young boy in whom scald-head had been suppressed by frictions with the oil of sweet almonds.

(83) In the case of children, accompanied with hooping cough.

(84) After two antipsoric frictions, epilepsy appeared in a young woman.

(85) A young man aged 18 years having used frictions with mercurial preparations, for the cure of itch, was seized some weeks afterwards with epilepsy, which returned at the end of a month, at the time of new moon.

(86) A boy seven months old was attacked with epilepsy without any acknowledgement on the part of the parents of the re-percussion

of any exanthem. On more exact enquiry, the mother allowed that he had had a few spots of itch on the sole of the foot which had been promptly removed by a saturnine ointment, but otherwise had had no vestige of the itch on the rest of the body. The physician regarded with justice this circumstance as the sole cause of the epilepsy.

(87) Two children were freed by the appearance of mucous scald-head from an epilepsy, which reappeared whenever the cutaneous disease was imprudently attempted to be cured.

(88) The disappearance of the itch which had existed five years, produced epilepsy several years afterwards.

(89) The itch was suppressed in a young man aged 20 years, by a purgative, which acted copiously for several days, after which he remained for more than two years subject every day to the most violent convulsions, till at last the itch was restored to the skin by the sap of the birch tree.

(90) A young man aged 17 years, of a robust constitution and sound mind, became subject, after the re-percussion of the itch, to spitting of blood, then to attacks of epilepsy, which were aggravated by the means employed as remedies, to such an extent, that they returned twice every hour. Repeated bleedings and large quantities of medicine freed him from the epilepsy for a month; but shortly after, this disorder reappeared during sleep in

PARALYSIS—Hochstetter, *Obs. med. Dec. VIII.* obs. 8. S. 245.—*Journ. de Méd.* 1760. Sept. S. 211.—Unzer, *Arzt*, VI. St. 301.(91)—Hundertmark, a. a. O. S. 33.(92)—Krause—Schubert, *Diss. de scabie humani corp.* Lips. 1779. S. 23.(93)

the afternoon, and the patient had two or three paroxysms every night, in addition to which he had a considerable cough, particularly during the night, and expectorated a very fœtid liquid. He was confined to bed. The disease was so exasperated by the remedies, that the paroxysms returned ten times by night and eight times by day. However, he never foamed at the mouth. His memory was impaired. The paroxysms appeared before meals but more frequently after. During those of the night he remained buried in the most profound sleep without awaking, but in the morning felt as if bruised. There was no premonitory symptom of the attack, except that he rubbed his nose and drew up the left foot, after which he fell suddenly.

(91) A woman became paralytic in one leg in consequence of the re-percussion of the itch, and remained paralytic.

(92) A man aged 58 years was attacked with hemiplegia, after having treated the itch with an ointment containing sulphur.

(93) A man who had employed, for a long time without success, internal remedies for the cure of the itch, at length lost patience and had recourse to frictions; some time after, he was attacked by paralysis of the upper extremities; the skin on the palms of his hands became hard, thick, and full of bleeding chaps, accompanied by insupportable itching.

The author speaks also in the same place of a woman, who, after the re-percussion of the itch, became afflicted for a long time with contraction of the fingers.

MELANCHOLY.—Reil, *Memorab. Fasc. III. S.* 177.(94)

DELIRIUM.—Landais bei Roux, *Journ. de Méd. ecine*, Tom. 41.—*Amat. Lusitanus*, *Curat. med. Cent. II. Cur.* 74.—J. H. Schulze—Brune, *Diss. Causus aliquot mente alienatorum*, Hal. 1707. Cas. 1. S. 5.(95)—F. H. Waitz, *medic.-chirurg. Aufsätze*, Th. I. S. 130.(96) Altenburg 1791.

(94) Reil saw idiocy succeed the suppression of the itch, and disappear on the reestablishment of the exanthem.

(95) The hands of a young man aged 20 years were so loaded with a moist itch that he could not follow his occupation. He was cured by an ointment containing sulphur; but a short time afterwards his health was discovered to have received a serious injury from that cause. He was affected with mental alienation; he laughed and sang without motive, and ran till he fell from weariness. From day to day he became increasingly diseased in body and mind, till at last he died of hemiplegia. The viscera of the abdomen were found all combined in one mass which was covered with small ulcers and full of knots, some of them as large as nuts, in which was found a viscous, gypsous matter.

(96) The same case related by another physician.

DATURA STRAMONIUM.

(THORN APPLE.)

Poisoning by Stramonium may be remedied by *Black Coffee*, or *Vinegar*, (or *Citric Acid*), in large quantities, and if the vomiting is slow in manifesting itself, an injection of *Tobacco Smoke*.

MATERIA MEDICA.

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CHAPTER V.

The different modes by which physicians have undertaken to acquire the knowledge of the general and particular properties of remedial agents, necessary to the successful prosecution of the healing art, have been passed in review, and it has been shown that neither chemical analysis, botanical affinity, nor sensible properties—not to mention the less plausible doctrines of signatures, and other exploded dogmas of a less advanced age—are sufficient to supply the requisite information.

The power of a particular drug to affect the living organism, either beneficially or the reverse, consists, not in its specific gravity, or color, or any quality that may present itself to the senses, or be developed by the crucible of the philosopher; but is a peculiar dynamic property, not depending upon any of these, and which exhibits itself only when brought into relation with the vital force. It is as unreasonable, therefore, to expect to discover the therapeutical uses of a medicine by any of the modes referred to, as to undertake to ascertain its *chemical* affinities by its specific gravity or its color. Medical men have not failed in many instances to discover and acknowledge this, and to teach that the only sure guide to the selection of remedies is **EXPERIENCE**. The conclusion of our last chapter furnished two or three instances of this testimony, and much more of the same character could be adduced, if the proposition itself were not so plain and evident, as to commend it to the approbation of sound reason.

But while admissions to this effect readily accumulate in the hands of the careful student, he will not fail to observe, that, although the necessity of experiment is allowed in the abstract, yet very few medical dogmas are founded thereon. Nay, the most pertinacious supporters of the crudest theory are frequently the most strenuous in their appeals to experience, and the veriest charlatan will overwhelm the man of science with his flood of wonderful facts. Dr. Cullen writes, (in continuation of his remarks quoted in our last number,) that “an experience of the effects of substances upon the living human body is certainly the only sure means of ascertaining their medical virtues; but the employing of this experience is extremely fallacious and uncertain, and the writers on the *Materia Medica* abound with numberless false conclusions, which are, however, supposed or pretended to be drawn from experience. Such indeed is the state of this matter, that nobody can consult these writers with any success or safety, unless he is prepared with a great deal of skepticism on the subject.”

Thus has it been both before and since his time: you will find authors admitting the necessity of experience, appealing to it as evidence in favor of their adopted theories, and at the same time condemning the experience of their predecessors as fallacious and deceptive, or perhaps as entirely false or pretended. That these epithets have often been justly applied, even by those whose array of experimental results, as well as their teachings, were obnoxious to the same objections, is doubtless too true; and although it might be hazardous for a Homœopathist to make these charges against the experience, so called, of the “rational” schools, on his own responsibility, he cannot be justly complained of as indulging a captious and fault-finding temper, while this position is so strongly fortified by the testimony of the schools themselves.

The experience of the medical profession with regard to the *Materia Medica*, has thus far been chiefly useful in revealing the falsity of the theoretical systems of practice which have successively risen ; without, however, doing anything toward the establishment of a truly scientific and permanent system, as we might reasonably have expected to be the case, had this experience been properly conducted.

The following passage from Dr. Bostock's *History of Medicine*, prefixed to Dr. Doane's edition of *Good's Study of Medicine*, is applicable to this subject. "In modern times, and more remarkably in Great Britain, no one thinks of proposing a new mode of practice, without supporting it by the results of practical experience. * * * Yet in the space of a few short years the boasted remedy has lost its virtue, the disease no longer yields to its power, while its place is supplied by some new remedy, which, like its predecessors, runs through the same career of expectation, success and disappointment. Let us apply these remarks to the case of fever, the disease which has been termed the touchstone of medical theory, and which may be pronounced its opprobrium. At the close of the last century, while the doctrine of Cullen was generally embraced, typhus fever was called a disease of debility, and was, of course, to be treated with tonics and stimulants. No doubt was entertained of their power over the disease ; the only question in the mind of the practitioner was, whether the patient could bear the quantity that would be necessary for the cure. To this treatment succeeded that of the cold effusion, and we flattered ourselves that we had at length subdued the formidable monster. But we were doomed to experience the ordinary process of disappointment. The practice, *as usual*, was found inefficient or injurious, and it was, after a short time, supplanted by the use of the lancet. But this practice was even more short-lived than either of its

predecessors ; and thus, in the space of forty years, we have gone through three revolutions of opinion, with respect to a disease of very frequent occurrence, and of very decisive and urgent symptoms."

In the case of the disease referred to, and the same is true of the great majority of sicknesses, experience has shown the inapplicability of particular remedies, or of particular modes of practice, but has not pointed out to us the true system to be pursued. It may have taught us some of the innumerable shoals and breakers that dash the hopes of the medical practitioner, but has left undefined the course of safety and success in a dangerous channel.

We are thus reduced to an evil extremity. It is shown that the indirect modes of investigation applied to the discovery of remedies, and their application, are incapable of supplying us with information deserving our confidence, but are, on the contrary, liable to lead us fatally wrong ; and it is also allowed that the results of practical experience have, in a great measure, failed to correct the false deductions of therapeutical systems, and of establishing definite and enduring principles of action. The fault, we believe, lies not in experience, as a means of testing medical doctrines, for by that test all systems must be tried, but in the improper manner in which the experience of physicians has been conducted, and its results collected, generalized and applied. As in previous chapters we have endeavoured to explain why the ordinary means of ascertaining the virtues of articles used as medicines, have led to endless mistakes, and retarded the advancement of the *Materia Medica*, so we propose to consider in this, why the practical experience of the medical profession has not long ago developed, such rules to guide us in this matter, as to secure their general adoption by the profession, and the confidence of mankind, and why it has

not served to correct errors, naturally derived from their hypothetical reasoning.

The first fact that deserves attention in this view of the subject is, that the immediate object most frequently sought for by the principal experimenters in pathology and therapeutics, has been to procure proofs and arguments to sustain a previously adopted theory, and not the discovery of facts, without reference to their bearing on any medical doctrine.—The mode of procedure, more in accordance with modern philosophy, of founding theory on a basis of previously discovered truths, scarcely seems to have been admitted into medical researches; and physicians, instead of proceeding carefully in the extensive observation of the operation and effects of remedial agents, before building their hypothetical structures, and laying down their rules of practice, have expended their energies in establishing a favorite system, or subverting an opposing dogma.

How the prepossession of the mind by a plausible hypothesis is calculated to warp the judgment in the observation of facts, the history of every science, sufficiently testifies, and none has suffered more from this cause than that of medicine, and particularly the *Materia Medica*. Under this influence, what is intended (often honestly) for experience, proves to be a partial and partisan effort, in favor of an opinion: favorable points are brought out in undue prominence, while others that seem opposed to the favorite doctrine of the observer, are suffered to pass unnoticed, or are explained away, thus giving to distorted truths and imperfect experience, a foot-hold that years, and perhaps generations, cannot entirely displace. Sometimes the same effects have been produced by an attachment to particular remedies, which their authors supposed they had discovered or invented, and which they have often supported by supposed facts, which, perhaps, their prejudices have made them sup-

pose to be true, but which they have admitted without rigorous examination of their truth, and sometimes, it may be suspected, when conscious of their falsehood.

From these considerations it is easily seen that the *Materia Medica* has had much to contend with, and to oppose its advancement, and that from the prevalence of hypothetical reasoning in the formation of medical systems, even the facts, so called, of system-makers are to be taken with no little distrust in many cases. There have not been wanting, it is true, some writers on the *Materia Medica*, who have professed to disregard all theory, and to give merely the effects of medicines, as observed by themselves or others. One of the earliest and most extensive writers of this class is **DIOSCORIDES**, whose work on the *Materia Medica* was, till within a comparatively few years, held by a considerable portion of the medical world in almost "superstitious reverence,"* but which would seem to be, for the most part, a collection, made under the influence of the most powerful credulity, of the virtues attributed to all the different drugs and compositions then in use, compiled from every available source, without the slightest examination into their correctness, and thrown together without order. To later writers, who have professed the same regard for experimental knowledge of drugs, the same objections apply with similar force, many of whom, indeed, have been content to compile from **DIOSCORIDES**, or to refer to him, as sufficient authority for any statement, however improbable.

A second fruitful source of error in the formation of a *Materia Medica* from experience and observation, may be seen in the fact, that hitherto the observations and experiments have been made almost exclusively on the sick alone. From this may be excepted

* Cullen's *Mat. Med.*, p. 15.

some observations accidentally made by persons in health, the effects of poison taken by accident or design, and some experiments on animals. The results furnished by these latter instances are, however, comparatively few, and but lightly esteemed in the prevalent schools.

The force of this objection to the ordinary experience of the schools, may not be at once apparent to those who are not already acquainted with the fallacies necessarily attendant on this mode of proceeding; yet we think it will not require a long course of argument to show that the position is correct, and that the *Materia Medica* owes much of its present degraded condition to this cause.

We would not be understood to undervalue this kind of experience, as a means of the merit of testing any system of practice, and we maintain that its results should be diligently observed, and carefully collected. Indeed, we may claim for Homœopathists, that they have set an example in this respect to all the world, and that they cannot be accused of neglecting this branch of medical enquiry, nor of fearing to submit to its ordeal.

There are, however, several difficulties in the way, that must ever prevent the *Materia Medica* from deriving fixed principles from any practicable amount of such experience alone. First, in point of importance, is the rarity of cases, in all respects identical: cases of the same name, it is true, are common enough, but it is well known that there are almost as many varieties of the same disease as there are individual cases, owing to differences of age, sex, temperament, previous diseases, hereditary influences, modes of life, climate, and a multitude of other modifying causes, known and unknown: so that although we find a certain medicine to have had a salutary effect in a particular case, yet we are by no means justified in expecting certainly the same benefit from the same remedy in another case,

of the same name. On the contrary, it is most probable that among many cases of the same disease (according to the books) no two will be found to agree in all particulars, or require the same treatment; nay, what is successful in one case may be highly injurious in another. This fact will explain the cause of the varying popularity of different modes of treatment, as in the case of typhus fever above referred to, and in almost every disease in the nosology. As every drug possesses some properties and uses peculiar to itself, and as every disease appears under an infinity of forms, it is manifestly necessary that every medicine should be administered in every variety of disease, if we would acquire a certain knowledge of all the uses of each individual agent, a thing evidently almost as impracticable.

The increased suffering, the loss of time, and, we may add, the loss of life that must sometimes occur to patients, from a mere experimental practice, must also present a powerful obstacle in the mind of the conscientious physician, to subjecting those committed to his charge to many experiments with medicines of unknown or uncertain power. There is a just and invincible prejudice in the minds of patients to "experimenting" on themselves, so that though any practitioner should be willing to assume the responsibility, he would find it impossible to carry on any regular plan of experimental research to any extent, without manifest injury to his professional reputation.

That *some* of the uses of drugs have been discovered either by intentional or accidental experience, (most frequently the latter,) is not denied. The curative powers of Peruvian Bark in intermittent fever, of Mercury in syphilis, of Sulphur in itch, of Iodine in scrofulous tumours, are familiar examples.

While we admit that some of the uses of particular drugs have been discovered, stumbled on, we might say, by empirical trials, or

their random application in disease, yet no development of principles can be expected to arise from such imperfect experiments, to guide our practice in new cases ; and many important properties, even of medicines best known, would, perhaps, never be discovered. As an illustration of our meaning, we may refer to any of the numerous newly discovered, and evidently powerful drugs that modern chemistry has revealed to us. In how few cases have they been administered with success, and how little is known of their effects on the living organism, or of their uses in the treatment of the sick. There is, indeed, very little satisfactorily known concerning them, although some of them e. g. *Kreosot*, have been before the profession several years ; and it will be long before any definite rules for their indication can be established, if we depend alone on trials on the sick for the information. Nor will our observation be less confirmed if we take an example from the ranks of the orthodox *Materia Medica*. There is no drug in the whole range of the *Pharmacopœia*, that has been employed in a greater number and variety of cases than *Mercury*, and that through a period of several hundred years ; and yet the medical world is to this day, greatly divided and unsettled in regard to its uses. While general experience has taught us some of its indications, its admissibility in a large majority of the diseases of ordinary practice is still a mooted point, and, it may be added, always will be, unless a more decisive mode of experimenting is admitted.

Allowing, however, as we may, that mankind might, under favorable circumstances, in the course of time, arrive at tolerably correct conclusions with respect to the application of the principal drugs, even from empirical trials on the sick, there has, hitherto, been operating an additional obstacle, that would effectually prevent such a desirable consummation. In what we have already said, it has been sup-

posed that the experiments, so called, have been conducted with medicines in their simple form ; but it is well known that the supposition is altogether incorrect. Usually, several, often many different articles are combined in a single preparation, and administered at the same time ; and this, we consider, constitutes another cause of the uncertain results of ordinary medical experience. As the pure effects of each individual drug are unknown, much more must it be true of the whole composition ; but if the powers of each component part were well understood, it would by no means follow that the effects exhibited by the composition would correspond to those of the several ingredients, when administered separately. The aid of chemistry has been called in to assist in purging the *Pharmacopœias* of heterogeneous compounds, or those in which the articles introduced were found to be chemically antagonistic, while others, in which no such incompatibility was discovered, have been allowed to remain ; and it has been thought philosophical to say, that, because certain medicines may be mixed together, out of the body, without neutralizing each other, therefore they will retain their individuality of operation in the body. It is forgotten medicines do not act *as medicines* by virtue of their chemical properties, but by a peculiar relation existing between the remedy and the vital principle ; and that therefore every composition may, and most likely does, possess powers, and exhibit effects peculiar to itself, and not intermediate to, or composed of, those of its several ingredients ; that, in fact, any number of drugs, combined in one prescription, lose their individual identity, and form a new medicine, which, if admitted into the *Materia Medica* at all, should be subjected to the same rigid scrutiny and experimentation as if it were a simple drug.

From this it can readily be seen how much uncertainty and confusion must necessarily

arise from the frequent use of these multifarious compositions. Almost every practising physician varies the number or proportions of his ingredients according to his fancy, or the hypothesis that may be uppermost in his mind, and the combinations most highly approved in our country, or by one school, are denounced as inert, incompatible, or dangerous in another. So that we can scarcely look for very satisfactory results of experience, in ascertaining the properties of individual drugs, till medical men be content to confine their investigations to medicines in their most simple form.

An error analogous to that just referred to, and subject to similar objections, is found in the almost universal custom of rapidly following one prescription by another and another, before the effects of the first, either for good or evil, can be fully known.

There is still another cause operating to restrict the successful cultivation of the *Materia Medica*, and which, there can be no doubt, has had great influence in narrowing the field of investigation, as well as in giving rise to many erroneous notions in practice. We now refer to the passion for generalization, which has exhibited itself in every branch of science, and especially in the formation of systems of nosology, and in various classifications of therapeutic agents. The natural effect of this grouping of diverse substances in classes and orders, after the manner of a natural history, is to sink the importance of many valuable and essential properties belonging to the individuals composing the group, and to elevate that of some property which they possess in common. A glance at any of the most approved works on this subject will be apparent. We have not mentioned all the causes that have operated to render the experience of the medical profession, during so many ages, ineffectual in establishing the *Materia Medica* on a sure basis,

but the most important have been considered; and we cannot but think we have sufficiently accounted for the imperfect condition of our knowledge of this branch of medical science. In the next chapter it is our purpose to conclude this essay, by attempting to show that the Homœopathic law offers a sure guide to the formation of a pure *Materia Medica*, which will not be liable to the same objections as we have seen belonging to the old and prevalent systems.

GLEANINGS—NO. XI.

BY DR. J. C. PETERS.

1. GOOD, (Study of Medecine, 4th Am. edition, vol. 3, p. 290,) says, "it has been proposed by others to overcome the morbid sweats in consumption, *by exciting a sweat of a different kind*; for it is as practicable, says Mr. Watt, to cure sweating by sudorifics, as diarrhœa by cathartics." Good adds, "there is something plausible in this remark, and the experiment might, perhaps, be allowed to form a part of the reducent plan before us. Mr. Watt would prefer *mild* diaphoretics or relaxants to drastic sudorifics." On page 296, we are told that Dr. Young has sometimes succeeded very decidedly in checking the sweats in consumption, by Dover's powders.

2. BILLING, in his Principles of Medicine, says, that although no Homœopathist, he knows full well that *emetics will allay vomiting, and that purges will cure diarrhœa*; that tartar emetic, and almost any neutral purging salt, will cure the vomiting and purging that form so prominent symptoms of Asiatic cholera, quicker than any other remedies. When a student, and a "walker" in the Hospitals, he used to ask his teachers: Why does a dose

of Rhubarb or Castor Oil cure a diarrhœa of several days standing? In what way do they act? The answer was: "by emptying out the peccant matter." And when he would ask, ought not the diarrhœa to cast out this peccant matter? the reply would be, "not so well." Billing states that these answers did not satisfy him then, and do not satisfy him now, and that he is still at a loss for an explanation. We would ask, does not Homœopathia afford an explanation, however irrational such explanation may seem to us—it becomes us to be modest, and we may well argue with a quaint writer, "but still our reason may be frail, and so it may, and really so it is, to a great degree."

3. On another page, Billing states that: "it will, perhaps, astonish many to learn that Tartar Emetic relieves nausea and vomiting in like manner as sedative remedies do. Thus, in inflammations of the mucous membrane of the stomach and bowels, when attended with nausea and vomiting, these latter symptoms can often be relieved without the aid of blood-letting, by means of repeated *small* doses of Tartar Emetic.

4. DIERBACH, (present Professor of Materia Medica in the University of Herdelberg,) says, (see *Mat. Med.*, vol. 2, page 1161,) if a scruple or half drachm of Tartar Emetic be given at one time, it will produce excessive discharges by vomiting and purging, and that very dangerous symptoms will arise, followed by a condition which very closely resembles sporadic cholera, characterized by watery discharges, violent colic pains, continual hiccough, cramps in the legs, and paroxysms of extreme prostration, vertigo and swooning, which may terminate in death—yet we have just quoted Billing who states that Tartar Emetic will allay the vomiting in cholera quicker than any other remedy.

5. VOGT, (Professor of Materia Medica in the University of Giessen,) in his "*Lehrbuch der Pharmacodynamic*," states that Aconite will cause all the signs of an inflammatory fever, attended with severe pains in the bones and in and about the joints, which disappear after the breaking out of a profuse sweat, which sometimes smells sour, and is attended with the irruption of vesicles, which resemble the rheumatic miliaria, and by increased discharge of highly saturated and turbid urine. HARNISCH, who has written a prize essay against Homœopathia, crowned by the University of Gottingen, says that as Aconite accelerates the circulation of the blood, and causes febrile symptoms attended with severe pains in the fibrous tissues, but especially in the bones, joints and extremities, it ought, if there be any truth in Homœopathia, to cure acute rheumatism and gout; and adds that although Aconite is well known to be one of the most efficient remedies in chronic rheumatism, still it is equally well known to be contra-indicated [Allopathically, he should add] in active inflammations and in inflammatory febrile conditions. He also expressly states, on page 99 of his essay on the inadmissibility of the Homœopathic method of cure, that these pains in the bones, joints and extremities depend upon a violent inflammatory-like irritation of these parts. Now we read in the *Gaz. Med. de Paris*, 1834, No. 26, that LOMBARD, who is so well and favorably known to the medical world by his researches on phthisis, attributes a certain specific curative power to the alcoholic extract of Aconite in acute rheumatisms of the joints; and states that it quickly alleviates the pains and swellings, promotes the absorption of the synovia and other fluids which have been poured out in and about the joints. Lombard is physician to the Geneva Hospital, and has used the Aconite exclusively for two years.

6. In the *Hannoverian Annals of Collective Medicine*, part 6, p. 690, we find an article in recommendation of Aconite in acute diseases, by DR. KINDERVATER, of which the following is the substance :

Aconite is often given in chronic rheumatic affections, but simple experience has taught him to use it in active inflammations and in acute inflammatory and febrile conditions. We are told that chemical analysis shows us that Aconite contains only very small quantities of the narcotic alkalies, but that the *Acre* predominates in a remarkable degree ; whence we should think that it is the last remedy which a strict Allopathist should select for the cure of inflammations ; but the Doctor is no doubt a sound empiric, who thinks that reason may be frail, and gives the preference to means which he knows do cure. We learn that in cases of poisoning with Aconite, the phenomena caused by the *Acrid* principle predominate far over those caused by the *Narcotic* principle, and that congestions and increased vascular excitements are produced, and seek to extinguish themselves, by profuse critical discharges by sweat and urine. After the excessive *turgor* had been lessened in inflammations, the Doctor goes on to say, physicians do not hesitate to give Opium, Hyoscyamus, Crocus, Digitalis, Dulcamara, Senega, Camphor, &c., &c., all of which excite the heart and arteries, and why should they fear to give Aconite, which under like circumstances is almost specific against acute rheumatic inflammations. Ten years of experience have convinced him of the safe, rapid and perfect curative action of Aconite in acute internal inflammations caused by taking cold, and not self-interested motives, but a love of science and humanity urge him to make this public. The advantages of the Aconite treatment are : that the course of the disease is very much shortened, and the convalescence proceeds far quicker. SCHÖNLEIN'S assertion, that in-

flammations of the lungs need not run a certain course, but that they may be cut off in any of their stages, is fully substantiated when Aconite is given. The Doctor has treated very many cases, of pneumonia and pleurisy in which all signs of inflammation were removed by the *third* day ; and on the sixth or eighth the patient was generally able to return to his business, and in very many cases, as early as the fourth day. The crisis by sweat and urine take place much sooner, and is carried out more perfectly and powerfully, and each dose often causes a very quiet and refreshing sleep, which Opium, Laurocerasus, Hydrocyanic Acid, &c., rarely do. The whole disease is cured more thoroughly, and irritability of the air passages, predisposition to catarrh and relapses, and the general debility which cloud the period of convalescence under the common mode of treatment, do not occur. In inflammations of the lungs in children, when Aconite is used, general and profuse sweat, ease from cough and pain soon set in, and the whole disease is cured in a few days. When excessive irritability of the nervous system is to be relieved, and sweat is to be re-established, then Aconite acts admirably. Acute rheumatic fevers it cures in a few days ; it is almost equally beneficial in croup, in inflammations of the air-passages, in acute inflammations of the stomach and bowels, in rheumatic inflammations of the heart. The Doctor flatters himself to have taught the profession something previously quite unknown—he knows full well that STORK and BORDA were in the habit of using Aconite in acute inflammatory diseases, but he thinks that the endeavor to rescue a great truth from oblivion is also entitled to some praise. The Doctor usually commences the treatment of an acute inflammation caused by taking cold, by a bleeding of from ten to twenty ounces, and asserts that it was of very rare occurrence that he was obliged to repeat the venesection.

7. Perhaps no one remedy has been more frequently and successfully used by Allopathists in the cure of gout and rheumatism, than *Colchicum*, yet we read in the London Medical Gazette, No. 24, that a rather corpulent woman, aged 33, after drinking one ounce Tinct. Colchic. on a Thursday night at 11 o'clock, was seized in the course of three hours with violent pains in the stomach, vomiting, at first of food, then of masses of thick yellowish bile, and finally of thin, straw-colored bile, mixed with many small white, membranous pieces; with simultaneous bilious diarrhœa, and subsequent discharges similar in appearance, to the vomits;—the diarrhœa ceased by Saturday, but the vomiting still continued; on Friday, early in the morning, she was seized with severe stitches of pain in the fingers and toes, which also felt numb, and as if asleep; all the hand and foot joints became swollen and painful; at a later period pains in the shoulder joints supervened; on Saturday the hip joints and the loins partook of the sufferings, and stiffness of the neck and occiput ensued; the head felt as if closely compressed by a band; and there was pain at the root of the tongue when swallowing, or upon moving it. When these accidents reached their acme, profuse sour smelling sweats ensued. The reporter adds, "*the whole presented the appearance of a rheumatic fever.*"

8. ARMSTRONG (on Fevers p. 267) says: "If I should be asked how it is conceived that Opium operates in delirium tremens, I must confess myself unable to give a full and satisfactory answer, and can only say of it as Croserio said of two other medicines: *Quid scammonix radix ad purgandum, quid aristolochia ad morsus serpentum, possit video; quod satis est; cur possit nescio.* It is truly remarkable that one of the patients whom I attended was a female, who had long been in the habit of taking Opium to a great extent, and who was

attacked with delirium tremens, on suddenly lessening the doses of her favorite drug. An universal collapse was the first effect, and that was succeeded by irritability of the stomach, dampness of the skin, tremens of the hands, pain in the head, watchfulness and wandering of the mind.

9. BILLING assures us that Sulphuric, Nitric and Oxalic acids, when given in their concentrated form, occasion, like Arsenic, intense inflammations, which are dangerous to life; but adds, if they be properly *diluted* with water, they form not only a pleasant and refreshing drink, but also act as efficient antiphlogistic, or anti-inflammatory remedies.

10. WITHERING and others have drawn attention to the fact, that although Digitalis causes slowness of the pulse, it will not act as a diuretic in cases of dropsy, when the pulse is full and strong, but acts quickly and effectually when the pulse is weak and slow, and hence when it would seem to be contra-indicated.

11. HUTCHINSON remarks, that in poisoning with Veratrum, violent palpitation of the heart, intermittent pulse, and a condition of things which presents much similarity to organic disease of the heart, are very apt to ensue. In Johnson's Medico Chirurgical Review, Vol. ii. p. 196, we find an article headed "*Helleborus albus* (Veratrum album) *used for producing artificial diseases of the heart,*" and read that DR. QUAVRIER has given a short notice to the above effect, in the first number of the Provincial Medical Gazette. A man of the name of Chapman, belonging to the Marine Artillery, had found out the secret virtues of the white Hellebore, and turned it to the advantage, or rather disadvantage, of himself and others, to whom he sold his powders at a high price. By taking the Hellebore, every

appearance of dyspepsia, attended with great nervous irritability, and violent and continued palpitation of the heart were produced. This Chapman had deserted, and was taken in a remote part of the country, when he completely succeeded in deceiving the staff surgeon of the district militia, who examined him, and reported his incapacity for service, in consequence of *organic disease of the heart*. Dr. Quarrier states, that this practice of taking Hellebore was productive of some alarming consequences for a considerable period—some were permanently injured, *having actually produced the disease which they intended to counterfeit*. Dr. Johnson remarks, that “it is curious, however, that Hellebore should so particularly affect the heart, when taken into the stomach. We can hardly attribute this solely to sympathy of the one organ with the other. It would seem that there is a special or specific tendency in Hellebore to affect the heart, as Squill affects the kidney, or Cubebs the urethra. There is no accounting for, nor yet denying these specific tendencies in drugs. On the knowledge of these specialities, most of our success in practice depends.”

Yet in Johnson's *Med. Chir. Review*, Vol. 20, p. 407, we find an article by Dr. Turnbull, on the use of *Veratrine* in affections of the heart, in which it is stated that it may be used with great benefit in those anomalous functional affections of the heart, which alarm the friends, and excite suspicion of structural alterations. These diseases are generally characterized by difficulty of respiration, cough, expectoration, inability to remain long in a recumbent posture, palpitation of the heart, rapid, small, irregular pulse, with anxiety, and a sensation of pain, or rather of constriction in the region of the heart, &c., &c. Dr. Johnson very justly remarks, “if the above symptoms be those of functional disorder merely of the heart, we confess that we have studied in vain—for in our practice, they are

the phenomena of organic diseases.” And adds that he “is extremely rejoiced to learn on Dr. Turnbull's authority that in *Veratrine* we have a remedy for such symptoms—“A few doses have generally proved all that was requisite either to effect a complete cure, or at least to cause a cessation of the symptoms for a considerable time.”—“Although this be the usual progress of the action of the *Veratrine* in these diseases, it nevertheless sometimes produces effects of a different kind, at least during the time of its employment. It has happened, that from a single dose, the symptoms, and particularly the palpitation of the heart, have been increased to such a degree, as to render it impossible to induce the patient to submit to repetition of the dose; but what is not a little singular, the irritation has subsided in a day or two, and along with it every trace of the disease itself has disappeared.” Among the cures reported, is one of a clerk, aged 36, who had for 10 years palpitation of the heart, with pain and sense of stricture in the region of the heart, with irregularity of the pulse; the digestive functions were much disordered, and the nervous system highly irritable—he was cured in a week. “There is no accounting for, nor yet denying these specific tendencies in drugs. On the knowledge of these specialities most of our success in practice depends.”—JOHNSON. We take great pleasure in adding our mite towards strengthening the Doctor's position.

12. BILLING says that alkalies relieve acidity of the stomach for a time, but in order to cure it effectually, tonics, but still better an acid should be used, such as *diluted sulphuric acid*.

13. HECKER (see *Materia Medica*, p. 21) says that *Stramonium* can rob healthy men of their understanding, but it is also competent to cure mania. On the same page we are told

that Mercury, which acts so specifically against syphilis, excites in the healthy body a disease very similar to it. In Schmidt's Encyclopedia of Medicine we read that: "the difficulty of distinguishing the symptoms of a mercurial affection, from those of a syphilitic is very great, because a very deceptive similarity exists between the two."

GRAVES (see Clinical Lectures, p. 257) says: "A person who has fallen into the Mercurial cachexy, very closely resembles a scrofulous person, and is apt to labor under the same emaciation, impaired nutrition, irritability, feverishness, and the same sort of cutaneous, glandular, and periostitic affections: the chronic mercurial cachexy is very like the scrofulous, and attacks nearly the same organs and tissues. Yet Hufeland (see Enchiridion Medicum, p. 449) says: Physicians may say what they will, Mercury is almost as specific to annihilate scrofula as syphilis, usually, and in ordinary cases no other remedy is needed. Its internal use is alone sufficient to remove all symptoms and forms of this disease, as swollen glands, indurations, tumours, cutaneous diseases, ulcers, ophthalmias, and even caries." Graves also states on page 258: "Enlarged liver is the result of a general cachectic state of the system, and it is of importance to know that this state may be brought on by the injudicious exhibition of Mercury, and by carrying Mercurialization further than the constitution will bear. In this instance we are compelled to allow that our practice may furnish weapons to be turned against us by the disciples of Homœopathy. It cannot, however, be denied that the immoderate use of Mercury has been productive of liver disease. The late Mr. Hunt, pointed out this to the attention of those who visited the Lock Hospital, while under his care. At that time it was the custom to salivate every patient, and keep him under the influence of Mercury for weeks and months; and it frequently hap-

pened that just as the Mercurial course was finished, the patient got disease and enlargement of the liver."

14. The powerful action of *Nux Vomica* in causing derangements of the stomach, and tetanic, epileptic, and other spasms, is well known; yet it is used with success in the Seraphinern Hospital, at Stockholm, in gastralgias, with inclination to vomit, eructation, depraved taste, &c.

In the London Medical Gazette, vol. 19, p. 880, we learn that Dr. T. Mellor has found the *Nux* of specific curative action in cramps of the stomach from organic affections, or from simple disturbance of its nervous functions; also in all kinds of affections of digestion depending upon diminished nervous and muscular activity, as in sour eructations, painful distension after eating, flatulence, &c.

Horn and Heldebrandt have found it serviceable in epilepsies, depending upon some abdominal affection.

Geddings and Behrend advise it in morbid irritability of the stomach, with cardialgia, in chronic gastritis, and duodenitis, and the various dyspeptic affections growing out of them.

Schaible recommends it in epilepsy.

Dierbach in pyrosis, cardialgia, and gastralgia.

Melcombe and Huss advise it in dyspepsia, especially in the varieties termed pyrosis and gastrodynia, particularly when they appear to proceed from morbid irritability of the nerves of the stomach.

Luders recommends it in Traumatic tetanus.

Dreyfuss, Grimand, d'Angers, and Potter have used it with success to allay the vomiting in cholera.

15. *a.* According to ASSMUS, *Iodine* causes a profuse secretion of bile, with pressing and lancinating pains in the region of the liver, attended by a quartan fever with continual

debilitating diarrhœa; the fever soon takes on a continued type; the strength succumbs with great rapidity; the tongue becomes dry; the pulse small and feeble; while sleeplessness, great agitation, continual diarrhœa, and severe pains in the liver harass the patient; in the course of time *the liver may be felt hard and swollen*, and projecting from beneath the ribs.—CHRISTISON, in his work on Poisons, p. 137, has given the details of two cases of poisoning with Iodine, in one of which there was pain in the region of the liver, loss of appetite, emaciation, quartan fever, diarrhœa, excessive weakness, and after the emaciation was far advanced, *a hardened liver* could be felt beneath the ribs. In the second case there were: serous effusions into the cavity of the peritoneum; adhesion of the viscera to one another; *enlargement and pale rose red coloration of the liver*; effusion of a serum into the pleural sacs. Christison adds that it is not improbable that Iodine possesses the power of inflaming the liver.

Yet it is often advised in enlargements of the liver and spleen; and in Johnson's Med. Chir. Review, vol. 9, p. 168, we find a report of three cases of enlarged livers and spleen, cured with it by Dr. Milligan.

1. A child aged 5 years, with enlarged liver which extended down to the superior part of the hypogastric region—it was firm, colorless, pushed out the ribs considerably, with shooting pains—it had been growing for six months; it was cured by Iodine in two and a half months.

2. A child aged two years—tumour of spleen of eight months growth—cured in one month.

3. Tumour or spleen.

Jahn has used it with advantage in induration of the liver; Wutzer has cured two cases of induration of the spleen. While Kissam has even given it with success in dropsy dependant upon induration of the liver.—*Dun- glison's New Remedies*.

b. Lugol says Iodine sometimes causes *salivation*; Delisser has seen it cause ulceration of the mouth, fœtor of the breath, different, however, from that of Mercury; Cager has found it to cause ulceration of the mouth, mercurial fœtor and salivation; Manson, Winslow, Ely, Mackall and others, have seen it cause salivation—yet it is recommended in mercurial salivation by Kluge, Knod, Klode, Graves, Assmus, and others.

c. Krimer has several times noticed Iodine to produce obstinate leucorrhœa—while a Parisian physician made the observation, that during the employment of Iodine in goitre, obstinate and protracted leucorrhœa disappeared; this induced him to try it in leucorrhœa, and he found it very efficacious. Soden and Broglio likewise found it useful in malignant *fluor albus*; Muller has used it with marked advantage in chronic *fluor albus*, even when it is so excessive as greatly to reduce the strength of the patient; Grimette and Jervell also recommend it.—(See *Dun- glison's New Remedies*.)

16. In the course of our Gleanings we have pointed out very many instances in which Allopathists have applied drugs for the cure of disease in strict accordance with the law *similia similibus curantur*; and, in fact, we have shown in a few instances, that they have carried out the Homœopathic law with greater exactitude, and certainly with much greater boldness, and, perhaps, with more success in these individual instances, than the Homœopathists would have done under like circumstances. Thus, while the latter content themselves with giving a narcotic drug (Aconite) for the cure of acute inflammations, Johnson boldly uses $\frac{1}{4}$ to $\frac{1}{2}$ gr. doses of Lunar Caustic, in order to cure morbid irritability of the stomach, depending upon inflammation of its mucous coat; some Italian physicians use Cantharides in the treatment of all acute inflammations, and Hunt

gives Arsenic to cure "irritable uterus."* Again, while the Homœopathists are giving infinitesimal doses of Parsley for the cure of urinary diseases, some old and venerated sages in the Healing Art, use more massive doses of Cantharides for similar purposes. Thus we learn from an old and rare treatise, by Dr. Greenfield, in possession of Dr. Gray, on the use of Cantharides in ulcers, and diseases of the kidneys and bladder: that the great AVICENNA says if one complains of his urine, give one Cantharis, and it availeth; BAUHIN (see *de secretis*) tells us, in pains, diseases and ulcers of the bladder, when all other remedies fail, and no other method can be used, give one Cantharis; FABRITIUS AB AQUAPENDENTE (part I, p. 258) says, we have sometimes given a medicine for suppression of urine, which is this, viz. one, or at most, two Cantharides; BARTHOLINUS, who was in his time reckoned the most learned and famous Professor in all Europe, tells us in his Anatomical Histories, *curtur* 5; *histor* 82; "I have experienced the most wonderful and happy success from a potion of Cantharides, with spirits of wine, in virulent *lachryma venus*; Greenfield says of Cantharides in ulcerations of the kidneys and bladder:

"And what before exacted pain
Is now become an anodyne."

Still, upon the whole, Homœopathia, as practised by the old school, is generally of the crudest kind, being usually but poorly understood, and worse applied. These latter remarks apply especially to the following statements of Dr. Chapman, Professor of Materia Medica in the University of Pennsylvania.—(*See Elements of Therapeutics*, p. 171—76.)

It seems Dr. Chapman became convinced that yellow fever consists in a peculiar inflam-

mation of the stomach, which may be cured by drachm doses of oil of Turpentine, every hour or two. As the idea of gastritis cured by so stimulating a remedy as oil of Turpentine, might appear to involve a degree of incongruity, he has entered into some explanation on the subject. He, properly enough, as Dr. Johnson states, observes that nothing is more delusive than the doctrine of *identity* of diseased action with remedial agency.—[But it seems to us, that in this case, there is at least a little *similarity*.] The Doctor says: "Do we not see this in the efficacy of certain stimulating collyria in inflammations of the eyes—in the Copaiba and Cubebs in gonorrhœa—in Colchicum in gout—in Mercury in syphilis—in Capsicum in inflammations of the tonsils—in Mercurial ointment in erysipelas—not to adduce other instances, which might be done by appealing to the records of the Brunonian practice, which was often successfully conducted on this principle."

"Of the *counter agency* of Turpentine in scalds and burns we are aware. The stomach in yellow fever is in a state of inflammation, probably of a somewhat similar nature, which is overcome in the same way. This conjecture derives support from the consideration that in many instances, Turpentine is soothing in its effects, removing the sense of heat and irritation in the stomach, subduing the force of vascular action and general excitement, and inducing at once, a condition altogether of more comfort and security. Nor is it to be overlooked, that without any previous intercommunication of opinion, Turpentine was prescribed with great advantage, nearly about the same time in the plague at Malta, and is strenuously recommended by Orfila, as the best corrective of the inflammation of the stomach, from the acrid poisons. These coincidences are very striking, and in every view [hence also in a Homœopathic one] deserve our most serious attention." So be it.

* See 2nd and 5th Gleanings.

Dr. Chapman also has used with decided success, and recommends Turpentine in peritonitis and enteritis. So much the better.

17. Many Homœopathists point with no little exultation to the long array of physicians and professors, said to be zealously engaged in the propagation of Homœopathia, and to the host of intelligent and influential laymen who bear witness to the faith they repose in the new doctrine, both in word and deed—by defending its precepts, by exposing themselves to contumely and contempt, and by confiding their health and lives, and those of their families to the power and truth which they believe to be contained in it. But we are also called upon to hail its advance in another quarter. Do we not now see in each new treatise on the *Materia Medica*, that the effects of drugs are duly arranged into “the effects produced on the human economy in health,” and “the effects produced in disease?” We refer for proof to the late works of Vogt, Sobernheim and Dierbach in Germany, and to those of Pereira and Dunglison in England and this country. Who does not remember the fierce opposition to the thesis advanced by Hahnemann, that drugs cause diseases similar to natural diseases? Yet, read the following remarks by JAHN, the extent of whose acquirements and learning it would require pages to give a faint idea of. In his “*System der Physiatrik, oder der hippocratichen Medicin*, vol. 2, p. 25, we learn that: “All things belonging to the external world exert an altering and disturbing influence upon the human organism, and hence all of them may tend to restore health, and act as medicines. Hence the number of remedies is as great as the number of natural things, and truly innumerable.”

“Whenever the organism comes in opposition to any one of the potences of the external world, a single act of the vital processes is

exacted, altered, or increased, and thereby disharmony of the vital functions is produced, and disease generated.

“If all things belonging to the external world, which come in conflict with the human organism, act disease-producing upon it, then those potences also, which are brought into antagonism with it for the purpose of effecting cures of disease, must act proximately and originally in such wise as to produce disease; and hence their effects may be summed with justice, as *DRUG-DISEASES*, which in the future and further development of the doctrine of diseases should, and must be arranged in the nosological systems in company with the usual forms of disease, viz. in like manner as the Mercurial and Tartar emetic eruptions, the Lead-colic, the various forms of Gastritis and Enteritis venenata, the Sulphur-bath eruption, the Alcohol and Conium-acne rosacea, the Delirium tremens, Necrosis ustilaginea, Tabes Metallica, &c. &c., have already been described and arranged. It will also be found that their development, and the formation of their species and varieties are governed by the same laws, which govern the development and formation of the usual forms of disease.

“In like manner as there are two factors in the generation of each disease, viz.: first, the life itself, and second, the external, exciting irritation and potency which acts on the life and modifies it; so is every *drug-disease*, the product of the vital powers on the one side, and of the drug on the other, and must vary according to the differences in each of both these factors, i. e. every different form of life must possess peculiar predispositions to certain diseases, and each drug must be capable of exciting peculiar drug-diseases. The same drug will hence affect an animal differently from what it will a plant; a man differently from an animal; a Caucasian differently from a negro; an Englishman differently from a

German ; a child differently from an old man ; a woman differently from a man ; the mechanic otherwise than the sage ; one with typhus fever otherwise than one with gout ; Hahnemann differently from Jörg.

"In like manner as the external causes of disease often exert a complex action, inasmuch as very many of them act not merely upon one, but simultaneously upon several vital functions ; so does the same law hold good with regard to drugs, inasmuch as very many of them produce not only one but several drug-diseases—mercury causes salivation, *fluxus pancreaticus*, diarrhœa biliosa ; lead causes colic, constipation, paralysis, &c.

"Inasmuch as the fundamental character of the action of drugs is regulated and modified by the organic functions upon which they act, so must they, like natural diseases, be classified according to the relations which they bear to the different modifications and alterations which they produce in living organisms ; and hence there should be as many divisions of drugs, as there are main divisions of diseases.

"Drugs, then, should be divided into those which affect the sensitive life, and those that disturb the vegetative life ; the latter should be sub-divided according as they affect the different processes of the vegetative life, viz., into such as : 1. increase the activity of the lymphatic system ; 2. those which develop the energies of the arterial system ; 3. those which excite the internal nutrition ; 4. those which hasten the processes of dissolution and decomposition ; 5. such as increase the venous activities ; 6. such as excite the excretory processes, &c., &c. Those which act upon the sensitive life may be divided, 1. into those which excite the activities of the motor nerves ; 2. those which spur on the sensations ; 3. those which arouse the lower passions ; 4. those which stimulate the understanding ; 5. those which arouse the will, &c., &c. Again, 1. into

those which paralyze the motor nerves ; 2. those which dull the sensibilities of the sensitive nerves ; 3. those which deaden the lower passions ; 4. those which limit the powers of the understanding ; 5. such as paralyze the will, &c., &c.

Jahn says that he has reason to hope that this classification of drugs may in the course of time be united with a natural-historical or rather natural-scientific arrangement, and that thus a truly natural system of medicine may be developed." May the time soon come.

18. It would seem that a proper valuation of the law *similia similibus* is gradually gaining ground in the old school. Thus DR. ALEXANDER WALKER says that : In every disease there are two kinds of symptoms, morbid and curative, and these are utterly and directly opposed to each other. It is consequently the chief duty of the physician to make a distinction of the morbid from the curative symptoms. The next duty is the prescription of simple remedies, of which the effects (as proved by experience) are respectively contrary to the morbid symptoms, and similar to the curative.

"*Contraria contrariis curantur* is the law for the treatment of morbid symptoms, to which no other law can possibly apply ; and though often abused, it is applied equally in the common practice and in Homœopathia. This law demands the prescription of doses relatively large—large compared with those which would aid the curative symptoms.

"*Similia similibus curantur*, is the law for the treatment of the curative symptoms, occasionally and indistinctly acted upon in the common practice, but constituting the solely recognized and too exclusive basis of Homœopathia, which acts upon it as perfectly as is permitted by the fatal error of not distinguishing between morbid and curative symptoms.

This law demands the prescription of doses comparatively small, because the medicaments are such as act in harmony with and have only to come in aid of the efforts of nature, viz., of the curative symptoms, the unaided power of which is often sufficient to cure.

"Medicines should be perfectly simple, and their power should be determined by their effects on persons in health as well as in disease, and in the administration we should follow as far as possible the order of phenomena.

"Where the cause and morbid symptoms can be at once removed, the law *contraria contrariis curantur* should be acted upon, as in taking a thorn from the flesh—antidoting acids with alkalies, &c., and the law *similia* need not be acted upon at all.

"Where the morbid and curative symptoms follow in successive stages, the morbid symptoms should be first attacked by the law *contraria*, and then the curative should be aided and guided by the law *similia*.

"Where the same medicament at once attacks the morbid and aids the curative symptoms, both laws will at once be acted upon, as by at once removing the irritating matter and aiding the ejection in diarrhœa.

"Thus the law *contraria* may be acted upon singly; or both laws in succession; or both laws at the same time and by a single medication.

"The doses of medicines ought to be regulated by their intended application to the morbid or curative symptoms.

"We should apply the aphorism *contraria* and antipathic remedies exclusively to the treatment of morbid symptoms; and the aphorism *similia* and symphysic (with nature) remedies exclusively to the aidance and guidance of the curative symptoms—the consequent and distinct appropriation of large doses to the former and minute doses to the latter.

"I have especially endeavored to prove the truth of both these laws, which have hitherto

been considered contradictory, and of which it was thought one at least must be false, as well as to show the precise and definite application of these two laws, each of which has hitherto been supposed to be universal and exclusive.

"The Homœopathist in the greater law *contraria contrariis curantur* has much to receive, even if we knew less than we do of the causes or nature of diseases, to which alone that law applies; indeed at this moment he unconsciously uses it, and where he does so, such is its value, that he founds upon it his very first operations in the cure of disease! Without it, in innumerable cases, the law *similia* would be acted upon in vain.

"The regular practitioner, on the other hand, has to receive more extensively and accurately the minor law *similia similibus curantur*, a law of immense importance, though as yet of imperfect application, and which in some cases he employs indiscriminatingly. The treatment founded upon this law has much to recommend it on the score of humanity, since, the moment it comes into play, minute doses are substituted for monstrous and disgusting ones; and in many instances for painful and dangerous operations. Without this law *contraria contrariis curantur* will be acted upon in vain in innumerable cases.

"The union and proper application of both laws, the less as well as the greater, which are thus but portions of one system, will evidently ensure to a greater extent than hitherto, the cure of diseases. All that is required is that the practitioner shall distinguish the symptoms to which the laws are respectively applicable.

"I need not say how different this union in which one law is applied to the morbid, and the other to the curative symptoms, is from the unprincipled and injurious practice at the choice of the patient, either method, the common or the Homœopathic, in their present opposed and exclusive state; for in that case

antipathic remedies are injuriously opposed to curative symptoms, and Homœopathic remedies are idly opposed to morbid symptoms.

“Nor is it necessary to recommend to medical men such unity of procedure; its realization is inseparable from the progress of knowledge; and those alone will be sufferers who neglect speedily to profit by it. *He who rejects either law does so at his peril.* He in fact declares that he will practice only one portion of medicine, or rather that he will attempt to cure only one series of symptoms while he exasperates the other.

“Those who think that their caprice may with impunity be indulged in matters of such moment, ought to be reminded of the remark of Ancillon, that nobody has a right to disturb, to paralyze or to impede the intellectual march of mankind. Happily if any one were disposed to do so, his malignity would at length be powerless. The feeble arm of man cannot long counteract the laws of nature, nor overthrow the order of the universe. Man may effect much if he confine himself to its eternal track; but if he endeavor to give it a retrograde motion, he is seized, hurried away, and crushed by the vast and onward moving wheel of time.”

HOMŒOPATHIC LITERATURE.

37. *Enchiridion de la Matière Médicale Spécifique.* 1re Livraison, Supplément au numéro de Decembre, 1840, de la Revue Critique et Rétrospective de la Matière Médicale Spécifique.

38. Congrès Scientifique de France. 9e Session, tenue à Lyon: Homœopathie. DE L'ART DE GUÉRIR ET DE SES PROGRÈS, Discours lu à la section Médicale du Congrès, le 4 Septembre, 1841, Par. J. M. Dessaix, D. M. Chevalier de la Légion-d'Honneur.—“*Nous devons nous occuper des questions les plus importantes.*—Viricel. Paris, 1842.

SOCIETY OF

HOMŒOPATHIC MEDICINE,

OF PARIS.

The Society proceeded, by secret ballot, to the election of officers for the year 1842-43: The following were elected:—

CROSERIO, *President.*

LEON SIMON, *Secretary.*

CATELLAN, *Treasurer.*

D O S E.

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A T T E N U A T I O N S.

After adopting some local regulations for the government of the Society, the rest of the sitting was occupied by a discussion on the relative efficacy of the different attenuations, whether in the treatment of acute diseases, or in that of chronic diseases. The result of this discussion was that, hitherto, it appeared impossible to give any fixed and invariable rule; that, if it were true that in acute diseases the low attenuations ought to be preferred to the high ones, this rule would, nevertheless, admit of so many exceptions, as to render it impossible to make it a general law; that, in like manner, in chronic diseases, there are many, and herpetic affections are of this number, which have yielded completely to the use of a medicament in the low attenuations, after they had resisted the same medicament, when administered in high dynamizations. The conclusion of this discussion was, that the surest rule to follow was to *individualize the dose and the attenuation with the same exactitude with which we would individualize the remedy.*

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VOL. 3.

LECTURE

ON

HOMŒOPATHIC THERAPEUTICS,

Delivered at the Royal Athenæum of Paris.

FROM THE FRENCH OF

DR. LEON SIMON.

BY JAMES M. QUIN, M. D.

[By an arrangement contrary to its usual practice, the Royal Athenæum of Paris resolved to give two courses on medical sciences, to take place on the same evening, one to be delivered by M. Alphonse Sanson, one of the Faculty of Medicine, and the other by Dr. Leon Simon. The subject of M. Sanson's lectures was "Public Hygiene;" that of Dr. Leon Simon, Homœopathy. This arrangement went on harmoniously for a short time, and was attended with this advantage, that the respective claims of Allopathy and Homœopathy were placed before the same audiences, and at the same meetings, so that the means of judging between the rival systems, zealously supported by the respective champions, were put within the reach of all the auditors.

Had this course been continued in the true spirit which should animate those in search of truth, the results could not but have been highly favorable to the cause of science. But in a short time, with characteristic intolerance, M. Sanson made a most unjust and illiberal attack upon Dr. Simon and his doctrines, thereby at once degrading the controversy to one of a personal nature, and destroying all advantage to be derived from the arrangement. As a specimen of the style of M. Sanson, and to show his ideas of self-respect and his regard for the conventionalities of society, we will give one of his illustrations. He compares the Homœopathic physician to the highway robber! but with this difference, that the advantage was in favor of the latter; that the brigand, with his pistol at your breast, gave you your choice, "your purse or your life," while the Homœopathist demanded at once both purse and life! Such are the resorts to which Ignorance and Error drive their advocates, when sound argument fails them.

Dr. Simon, thus attacked, did not reply in like style, but simply laid down the fundamental principles of his science, and supported them by facts and arguments, innumerable and irrefutable. When he approached the subject of the *vital dynamization*, the rage of M. Sanson knew no bounds; he fulminated all the thunders of his eloquence at his adversary's devoted head, and concluded by giving a *false* account of the case of a well-known individual,

recently deceased. Dr. Simon thought that he could not, in justice to himself and to the cause he was advocating, allow such an attack upon his principles to go unanswered, and accordingly delivered the following lecture on the subject, and subsequently published it. It will amply repay perusal, and place the subject of which it treats, in a clear and true light. —*Trans.*]

GENTLEMEN,

I have announced to you that I would occupy to-day with the *Therapeia of acute diseases*, diseases which require tried means, by reason of the grave appearance which they often present; by reason, also, of the rapidity of their progress. Against these affections, the old school believe they have found in bleeding a therapeutic means sufficiently powerful, to dare to say that henceforth death is only an exception in the treatment of acute diseases.* The hardihood of this assertion, the confidence with which it is put forth, the strange polemic which has arisen in this place between Homœopathy and Allopathy, a polemic which I had no reason to dread, in which I have engaged without seeking it, all impose on me the duty of recurring to the higher problem of practical medicine, the theory of *vital dynamism*. Well understood, this theory becomes the key-stone of the arch of every system that has the least chance of success and permanent duration. Without it the physician proceeds at random, and descends from the character of a reflective and intelligent practitioner to that of a blind empiric.

What idea have I sought to give you of the vital dynamism?

What part have I assigned it in the production of diseases? What regard must we pay to it in their treatment?

* Vide Bouilland, Clinique Médicale, tome 2.

These questions comprehend, in my opinion, all that can possibly be said, and all that can possibly be known, with regard to the *vital force*. The answers to them determine, in the most unequivocal manner, the immense distance between the two schools. Indeed, on the employment of the infinitesimal doses, and on the law of *similia*, the discussion has soon defined its limits. Though scarcely begun, we find ourselves brought back to questions of fact, which experience either rejects or confirms; and experience supports neither idle discussions nor useless words.

But when the controversy is in reference to the fact the most general which the study of organized bodies presents, we must not be astonished if, on that subject, the discussions have been numerous and animated, and if, as I will shortly prove, authors have not always been consistent.

I have said to you, that in reference to the question which now occupies our attention, Homœopathia teaches three principles:

1. That all the physiological and pathological phenomena observed in the human body, are governed by a force, unknown in its nature, but appreciable by its results; a force, one and indivisible, although multiplied in its manifestations, called the vital force.

2. That every disease is the result of an inharmonious impression, made by an external agent on that vital force.

3. That every mode of treatment ought to have for its object the modification of the force of which we are speaking, and to bring it back to the normal type, from which it has temporarily strayed; and that on this single condition is it granted us to obtain radical cures: i. e., to destroy the disease in its cause and in its effects.

What has been objected to this?

No one has had the hardihood to question the idea of the vital force. This idea has been too long introduced into the science, it

has there taken too deep root, to allow of its being successfully assailed.

Leaving then the question of principles vague and indefinite, they have contested the consequences which necessarily flow from it.

It has been said, that, if it were correct to acknowledge, that at the beginning, every disease was dynamic in its nature, the vital force would soon react on the organs, and that the organic modifications resulting from that reaction would be the only thing that the physician should have in view in the treatment, and the only enemy that he would have to combat.

It is not sufficient, it has been added, to attack the *cause* of a disease, although it may be useful to remove it to a distance ; we must occupy ourselves with the *effect* produced, and combat it.

In fine, it has been concluded that in adopting the theory of the vital dynamism, and in allowing ourselves to be guided exclusively by it in practice, we propose a problem composed of an infinite number of elements, having regard to but one of them, and neglecting all the others.

In support of these assertions, an appeal has been made to facts and reasoning. It has been asked if, in the case of hanging, the first thing to be done was not to cut the cord that is strangling the victim, and if it would not be losing precious time to attempt to modify the vital force necessarily injured, in a case so serious and so rapidly mortal.

You have been told of *Pneumonia*, an acute disease, serious on account of the rapidity of its progress, and the importance of the organic apparatus in which it displays itself. You have also had cited the example of ossification of the valves of the heart.

To all these objections I will reply during the present meeting ; not that the examples chosen are felicitous ones ; not that the reasonings to which they have given rise can weaken

the proposition that I have maintained and developed ; but because they both present me the opportunity of giving a new support to the doctrines which I am defending, and because they form a very happy introduction to the therapeutics of acute diseases.

I beg, gentlemen, that you do not mistake the object which I propose to myself. It is exclusively scientific ; and I cannot give you a better proof of it than by giving to my convictions the immovable foundation of positive facts, for the most part acknowledged by the two schools. In our day, protestations of sincerity have but little value, and I will not, accordingly, spread them lavishly before you.

But I cannot help expressing my astonishment that the critic to whom I am about replying should have dared to doubt my sincerity. If I did not know the important part which the smaller passions play in the life of men of science, my astonishment would be still greater.

William Harvey discovers the circulation of the blood, and forthwith he meets with numerous enemies, among whom, and at the head of whom, we must place Riolan, the first of the French anatomists of the age. Broussais undertakes, in our day, to reform the art of healing in all its parts ; and, for many years, Broussais heaps injury upon an old man, almost an octogenarian, who was his master—against Pinel, a man most justly beloved for his character, and whose works were enjoying a deserved reputation. A rapid popularity, but alas ! of short duration, encircles the work of Broussais, and soon the demon of Envy is let loose upon him, pursues him to his chair, in his clinique, and obliges him to waste his health in the heat of a polemic, ever springing up anew ; and many of those who persecuted him with the greatest fury, felt themselves honored, at a later period, in sitting beside him, whether at the Academy or at the Faculty. You see, then, that in the sciences, as elsewhere, Fortune has her caprices ; opinion is readily tossed to and fro ; the



enemy of to-day becomes the friend of to-morrow; in proportion as truth becomes mighty, she obliges the most refractory to bow beneath her sceptre. Let us then patiently wait for the day of justice. If I give utterance to some expressions inspired by a just indignation, do not suppose, as you have been told, that I have rebelled against criticism. Revolt is legitimate in case of oppression, and oppression is always derived from the possession of power; I do not think that there is in this instance any room for revolt.

Let us resume the question where I had left it.

The existence of the vital force being conceded, I think it useless to return to this point. However, I wish you to observe how much I have been misunderstood by the critic to whom I am replying. He has supposed that I had represented to you the vital force as a spiritual being, lodged in the organism, and influencing it, entirely distinct from it. Reasoning on this hypothesis, he has granted that, in every disease, the vital force received the first morbid impression, that it repeated this impression on the organs, and that disease did not truly exist except at the moment when the organs received that influence. I have not adopted a similar mode of reasoning, because, gentlemen, this would be restoring to honor a hypothesis long since justly despised. I wish to speak of the hypothesis of Stahl, and of all the *animists*. It would be, moreover, going beyond the observation of facts.

I have adopted the position of Newton, and not that of Stahl, of Vanhelmont, or of Barthez. Newton has said, that all the phenomena of physical order were manifested, as if all the bodies of nature were incessantly acted on by a force which he named *Attraction*. We, in our turn, say that all the physiological and pathological phenomena develop themselves, as if there existed in man, a force ever present, inherent in the organism, which

should be the principal director of all those phenomena. There is our opinion, and we say nothing more, nothing less. What is the essential nature of that force, what becomes of it, when, after death, the body falls again under the influence of physical laws, I know not; and I deplore my ignorance the less, since a little more light would add nothing to the power of the physician. The law of Newton, applied to the study of the bodies of physical order, has enabled us, as you know, to explain them all, to calculate their return, their extent, and their degree of force; it has added to the power which man has, in all times, exercised over nature; what more do we desire?

The nature of the vital force dissipates the greater part of the obscurities of physiology and of medicine, presents to the observation a fixed point, and a directing principle; why should we go beyond it?

In what, then, does the idea which I present to you resemble the ideas which were current in the science before Hahnemann? in what does it differ from them?

It resembles them in this; that by the impression of the vital force, we will designate the mysterious and profound CAUSE which animates the whole living being, constitutes with it the body, presides over all its functions, and is the starting point and termination of all the modifications which disease produces. It differs from them in this; that, the principle once admitted, we know how to undergo the consequences of it, when we maintain that all rational medicine ought to have for its object the modification of the vital force; in other words, to act on that sole cause of the phenomena, so varied, which the life of organized bodies presents. We can no longer say with Vanhelmont, that the spirit which has formed the various parts of the body, and has distinguished them, one from another, has therein assumed also the modifications peculiar to those same



parts produced from the seed; the *influx* spirit being there determined by that which is *inherent*. We can no longer say that *each one of those particular lives in the various organs, is separated from the common life of man, as much as things could be which have different existences*.* This notion of the vital force differs equally from the opinion of Blumenbach, who, in his physiology, establishes several classes of *vital forces*, which is admitting multiplicity in a condition, in which, by the sternest necessity, the most perfect unity should reign. We may well say, with Barthez, that the principle of life, by which man is animated, should be considered as the most general experimental cause, with which the phenomena of health and of disease present us;† without, however, going so far as to assent, with that same author, that the vital principle exists independently of the mechanism of the human body, and of the affections of the thinking soul.‡

Thus, gentlemen, the existence in man of a principle of life, one, and indecomposable, which binds together all the functions and all the actions of human life, and makes them all tend to one common end—this is the first fact that I establish, and which cannot be controverted but by destroying life itself.

But this principle of life manifests itself differently by reason of the difference in the physiological functions, and in the structure of the organs which are the instruments of it. This is the second fact of the theory of the vital dynamism, and this fact is too evident to render it necessary to insist upon it.

* Spiritus enim, qui partes ab invicem distinxit et formavit, mox in ipsis partibus, determinationes omnes suscipit . . . quia influens spiritus ab insito ibidem determinatur . . . Quae singulae a vita communi hominis sunt direptæ, quantum illa quae diversas existencias habent.—Vanh. Vita brevis, Op. omnia, p. 451.

† Nouveaux élémens de la Sc. d l'H. ch. 2.

‡ Id., p. 81.

Each function, and consequently, each organic apparatus, has a relation of affinity to an order of modifiers: as the affinity of the respiratory apparatus to atmospheric air, of the digestive apparatus to aliments, of the nervous system to the imponderable fluids, &c. As these modifiers, at the same time that they are the elements of life, may, and do often become the causes of disease, be not astonished if, in the production of these latter, the inharmonious action of the vital force manifests itself variously, by reason of the diversity of the cause which has acted on it; so that it is sometimes the digestive apparatus, sometimes the circulating system, at one time the pulmonary apparatus, at another the nervous system, &c. which become the principal, though not the exclusive, seat of disease.

If, instead of being dynamic or general, as I have proved, diseases were local or organic, according to the doctrine of the Allopathic school, how could we explain the existence of the symptoms called *sympathetic*, symptoms so numerous that, to the attentive observer, in every disease, whether acute or chronic, there is not a single system, nor a single function, that is really in a healthy state, not only at the commencement, but throughout the entire course of the disease?

Will any one say that scrofulous subjects, those laboring under pulmonary phthisis, cancer, or herpetic affections, have a single point of their organization truly free from the pathological disorder? Will any one say that persons sick of eruptive fevers, of the cholera, of influenza, of acute peritonitis, of pleuropneumony, are, in like manner, healthy in any respect? And if, in reality, this imposing train of sympathetic symptoms, considered as accessory symptoms, were nothing more than the consequence of the primitive alteration of a particular organ, why, I ask you, should it happen that these secondary symptoms manifest themselves at the very beginning, (and

this often happens), in organs which are not in direct physiological connection with the diseased organ? Thus, in jaundice, the sclerotic will become yellow from the commencement of the disease, while, frequently, the stomach and the intestines will present no appreciable symptom; in coryza, the patient will feel painful lassitude in the limbs, before having either cough or pain in the throat; certain species of erysipelas of the face will provoke bilious vomiting, without developing any cerebral symptom. The reason is, that the development of the symptoms called sympathetic always bears a relation to the nature of the morbid cause, and that by reason of that cause, the inharmonious action manifests itself variously; that, in fine, if there be any given disease, some symptoms primary and others secondary, this fact still further confirms the unity of our fundamental principle.

See, moreover, the strange contradictions which the advocates of *localization*, have been unable to escape. Broussais, who was, if not the author of this system, (for at the present day it is traced as far back as Galen),* at least its most zealous and violent defender, after having established in 1829, as one of the principal axioms of his doctrine that *all diseases are originally local*,† Broussais, carried away by the force of truth, does not hesitate to contradict himself in another of his writings. "We are sick," said he, "before the tissues are altered: spontaneous disease is always vital in its commencement, and consequently, to make a useful internal pathology, we must endeavor to appreciate the value of the group of symptoms from the moment they present themselves, in order to be able to act before the alteration in the structure of the organs takes place, since the cure is more difficult at

that period than previously."‡ Let us compare with this quotation, the observation so remarkable and so profound, made by M. Dubois of Amiens, in his *Traité de Pathologie générale*. "We have sought to establish the principle," says this author, "that, excepting cases of traumatic lesions, of humoral infections, and some others, diseases at their commencement, were all vital; that the causes of diseases did not at all, in general, affect the tissue of the organs, but their mode of vitality; that atmospheric changes, moral emotions, &c., could not act at first on the substance of the economy."§

What more does Homœopathy assert? It completes and defines whatever is vague and incomplete in the preceding proposition. Without mentioning the exceptions which the author does not designate, it ranges humoral infections under the common law, and makes an exception in favor of traumatic lesions, only in reference to the mechanical treatment. Why, I ask you, should we suppose that in the infection of Itch, in scrofulous, or in cancerous cachexies, the cause of the disease would be directed against the tissue of the organs, rather than against the mode of vitality, while we maintain the reverse in other diseases, in which the immediate contact is quite as easy to prove; as for example, in the production of certain affections, under the influence of atmospheric changes? It must be a consequence, or at least, we must give experimental proofs to justify the *antinomia*, which we are obliged to admit.

In regard to traumatic lesions, mentioned by M. Dubois of Amiens, and which the critic, to whom I am replying, has seized and made an argument against us, the exception must be maintained, but with the reservation that we consider as dynamic also, the affections

* See Bulletin de l'Académie Royale de Méd., Jan., 1842, the discussion on this subject between M. M. Double and Dubos d'Amiens.

† Commentaire des prop. de path., tom. I. p. 10.

‡ V. Examen des doct. méd., tome IV. p. 642.

§ V. Pathologie générale, tome I. p. 168.

which are the consequence of their action. M. Sanson has thought to triumph over Homœopathy, by asking us if, in case of hanging, our first care would not be to cut the cord which is strangling the patient? Undoubtedly. The critic should have generalized the question, and then we would have answered him in the language of Hahnemann: "It is taken for granted that every intelligent physician will commence by this *causa occasionalis*; thus the indisposition usually yields of itself. Thus it is necessary to remove flowers from the room, when their odors occasion paroxysms of fainting and hysterics; to extract from the eye the foreign substance which occasions ophthalmia; to remove the tight bandages from a wounded limb which threatens gangrene, and apply others more suitable; lay bare and tie up a wounded artery where hemorrhage produces fainting; evacuate the berries of belladonna, &c., which may have been swallowed, by vomiting; extract the foreign particles which have introduced themselves into the openings of the body, (the nose, pharynx, ears, urethra, vagina); grind down a stone in the bladder; open imperforate anus of the new-born infant, &c.*

We pursue this course because the wounding body here performs the part of *causa occasionalis*. But as we have seen that the vital force, in its essential characteristics, is ever active, every where present, and inherent in the organism, that force cannot possibly remain free from the disorder induced by the cause mentioned. Again, it has been usual to consider diseases which are the result of traumatic lesions, as coming within the scope of medicine, and to treat them as such. What course does Allopathy pursue in cases of asphyxia by drowning, or asphyxia properly so called? It removes the occasional cause, endeavors to awaken vitality, by all the means

of excitation, then watches the reactions which will develop themselves at the moment when the vitality is re-established, and treats those reactions by themselves, and for themselves: i. e. exactly in the same manner that it would do for simple congestions. If a wound be the cause of disturbance, Allopathy again hastens to remove the occasional cause, dresses the wound in order to facilitate cicatrization, and is again constrained to watch until the vital reactions point out the line of conduct. For us the indication to be answered is exactly the same; all the difference lies in the difference of the means employed. This first objection, derived from traumatic lesions was, we see, badly chosen; for, if there be a point on which, theoretically, the two doctrines agree tolerably well, it is evidently the present.

But the capital objection, and to which I owe a peremptory answer, consists in asserting that, when once the vital force has reflected on the organs the morbid impression received by it, its action ceases, and that we need no longer attend to any thing except the effect produced; i. e. to treat the organic modification.

The action of the vital force can never be suspended for a single instant. As I have said, with Hahnemann, it is ever active, ever present; facts and reasoning bear witness to the truth of this law.

In fact, there are diseases which Allopathy often abandons to themselves, without opposing any active means to them, (eruptive fevers are of this number,) and in which the cure, nevertheless, takes place. In this case, and in many others of the same kind, to what can we ascribe the honor of the cure, if not to that force, ever active, ever present, and which essentially preserves its own nature? And how could it bring about a result so happy, if its beneficent operation were suspended for a single instant?

So much for the facts: now for the reasoning.

* Organon, sect. 7, Note.

The vital force, we have said, is the cause of all the phenomena of life ; now, as there is no effect without a cause, no vital phenomena can be manifested without the continued intervention of a force. To admit that this force ceases to act during a single moment, howsoever short, is to annihilate life, to destroy the living being. If you grant that at the beginning every disease is dynamic, you will be obliged to admit that its continuance cannot change its nature ; that, in other words, it cannot be maintained but by the power that has produced it. Now, you grant that modification of dynamic nature is the initial of every disease ; you must then go to the end of the reasoning, and pursue it to its farthest limit. In short, suppose the vital force of the human organism to be suspended, there remains nothing but inert matter, incapable, in itself, of producing disease or of maintaining it, much less of bringing about a cure ; incapable even of being affected by the operations of art.

There is no greater medical heresy than that which has been advanced in this room. On what proof of fact or reasoning can we base the assertion, that in therapeutics we must attend only to the result produced by the disturbance of the vital force, and not to the lesion of that force itself?

Three instances have been quoted : 1. hanging, and you have seen to what this objection reduces itself ; 2. pneumonia ; and 3. ossification of the valves of the heart. I will say but two words about ossification of the valves of the heart, wishing to concentrate the discussion to the essential instance, pneumonia.

To whatsoever system we may direct our attention, the ossification of the valves of the heart is, and always will be, an incurable disease. In this malady there is a change of the cartilaginous tissue into the bony, and, I presume, it will be acknowledged that we must abandon the hope of restoring a transformed

tissue to its primitive organization. Whenever, then, you approach a patient laboring under a similar affection, the treatment must be directed to soothe, not to cure. Similar instances can never serve, either to strengthen or to weaken a general therapeutic law. The example was badly chosen. Let us remark, en passant, that there is but little logic in the system pursued by criticism, when it seizes on exceptions, instead of attacking ordinary facts. Pneumonia was of the latter number : it was an example well chosen ; that is why I will speak of it in some detail.

In pneumonia, gentlemen, Allopathy bleeds ; and cure, I acknowledge, often follows the employment of bleedings. By this practice, it acts directly on the effect, indirectly on the cause. Considered in reference to its external causes, to the nature of the lesions which it produces, to its progress, to its different periods, pneumonia is certainly at this day one of the morbid states with which we are best acquainted. If then, bleeding be a means as powerful, as direct as it is supposed, the results should necessarily be magnificent. Well ! the works of the *numerical school* enable us to settle our opinions on this point, in an irrefutable manner.

Here are the results :

M. Andral gives a digest of 65 pneumonic patients : out of this number 36 died, 27 were cured ; giving the proportion of 1 death out of 1 $\frac{27}{36}$.*

Out of 123 patients ill with peripneumony, treated by M. Chomel at the hospital of La Charité, there were 40 deaths, about one third of the whole number ; an enormous mortality, says M. Bouillaud, nearly the same as that of typhoid fever.

Out of 90 pneumonic patients treated by M. Guéneau de Mussy, 38 died ; mortality $\frac{4}{5}$, or about 42 out of every 100.

* Andral, Clin. Méd. tome 1.

Out of 63 pneumonics received in the hospital Cochin, under the care of M. Bertin, 16 died; mortality about 1 out of 4. The same proportion was observed at the clinique of the faculty, while M. Cayol had charge of the treatment.*

If we could believe Laennec, out of 30 cases of peripneumony treated by stibiated tartar administered according to the formula of Rasi, 27 got well. But, besides that this result has not been proved by an exhibition of facts, it would prove nothing even if we should admit it as true. All the patients treated by stibiated tartar, had been previously subjected to bleeding; which renders it very difficult to estimate the comparative value of these two means.

In fine, M. Bouillaud, from whom I borrow the above mentioned details, by making a bolder use of bleeding than any who have preceded him, arrives, we must say, at a more satisfactory result. He loses but one out of 8 or 9.†

Let us compare these different results.

I grant three points: 1. bleeding effects a disorgement of the organ principally affected in pneumonia: 2. it facilitates absorption: 3. by weakening the vitality of the patient, it diminishes equally the intensity of the morbid cause. I can very well understand, then, that under the influence of bleeding (experience proves it), and in the most favorable view, the cure is in the proportion of 1 to 8 or 9. But I demand in return, that they grant me, 1. that bleeding, even in pneumonia, acts only on the phenomena of disease, in other words, on the effects: that, consequently, it is an indirect means of healing, which does not allow us to obtain all that we might possibly expect

from a direct means, that is, from one which would act on the cause, and, necessarily on the effect: 2. that bleeding is attended with the very great inconvenience of weakening the patient, in consequence of diminishing his powers of reaction; in consequence, also, of bringing about convalescences always tedious and often dangerous: 3. that it often leaves behind it the germs of the disease, which develop themselves at a subsequent period under the influence‡ of the slightest excitement, that is, that it predisposes to a relapse: 4. that the proportion of one death out of 8 or 9 patients, is but a feeble result for a disease as well understood as pneumonia.

Each of us, in the Homœopathic practice, being limited to his individual experience, and the hospitals being hitherto refused us, it is impossible for me to give you the comparative numerical results in the disease before us, as favorable and imposing as those contained in the writings of the Allopathic physicians. All that I can affirm is, that out of 17 cases of peripneumony, I have had but two deaths. I have published the account of one of them,§ in which the pleuropneumony was complicated with pulmonary apoplexy; the other was an intercurrent pneumonia in a phthisical young female. Among the other cases which terminated favorably, there is one which is too precious to me, in several respects, to allow me to omit it here.

In 1831, my son was attacked with an acute pneumonia, for which he was bled five times, and had several blisters applied to the sides of the chest. His life was in danger for more than six weeks, and the pneumonia did not

* Bouillaud, Clinique Méd. de la Charité, tome II. where all the cases quoted by me are recorded.

† Bouillaud, Clinique Médicale de la Charité, tome II.

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‡ I allude to those patients who, after an attack of pneumonia, have what is called a delicate chest, and have, every year, irritations of the chest, simulating pneumonia. Such patients are not at all cured.

§ Journal de la doctrine Hahnemannienne, tome I. p. 29 and passim.

truly yield till the stibiated tartar was administered according to the formula of Rasori. Even after the employment of this medicine, his convalescence was most imperfect, as I have elsewhere* stated, and he owed his perfect restoration, which did not take place till 1833, to the employment of the Homœopathic doctrine. In 1837 he had another attack; the disease occupied the inferior lobe of the right lung. The disease yielded completely in three days to one dose of *Aconite*, followed by one of *Bryonia*. On the eighth day from the beginning of the attack the patient had resumed his studies.

Multiplicity of facts is certainly of great weight in medicine, but the just appreciation of them has also its worth. If, in regard to an objection which presents itself to me, it were in my power, nay, further, if it were my duty, to enter into a detail of facts, one thing would strike you: that is, the difference in the *modus operandi* of Homœopathic agents, compared with that of Allopathic agents. Read the observations of the teachers of Allopathic medicine, and see how, under the influence of bleeding, the cure is obtained. Scarcely has a bleeding been finished, before you perceive a decided improvement in the local symptoms of the disease. The cough becomes more easy, the expectoration less viscous, the respiration more free, and the fever diminished. But, ordinarily, this amelioration is of short duration. The recurrence of the original symptoms soon obliges us to have recourse to new sanguineous evacuations, and it is only after the repetition, more or less frequent, of the same means, that the restoration is effected. Can there be a stronger proof of the fact which I advanced an instant since, that even when bleeding cures, it is only indirectly? To what can we ascribe the return of the symptoms after a

longer or shorter remission, if it be not that, the therapeutic agent expending its power on the effect and not on the cause, the latter follows its own natural tendencies, in continuing to act?

In Homœopathy, the reverse takes place. The general symptoms are the first to be mitigated, and the local symptoms next disappear; and when the remedy has been well chosen, every amelioration is obtained for good: we never witness those exacerbations which bring the patient back to the starting point.

Let me now generalize the question.

Pneumonia is not the only acute disease against which the virtues of bleeding have been heralded. In the epidemics of influenza, of cholera, of typhus, of scarlatina, in catarrhal and other affections, bleeding has, in like manner, been proposed and employed. Against each of these affections Homœopathy possesses means proved by experience. Well, when a country is subjected to any one of these epidemics, the means recognized as curative, possesses also prophylactic powers. Who would ever dare to assert that bleeding would protect against the disease?

Every prophylactic means necessarily addresses itself to the morbid cause. Now, if bleeding were directly curative in acute diseases, the absorption of blood would be sufficient to protect against an attack of typhus, of influenza, of cholera, of scarlatina, or of epidemic catarrh; just as it has sufficed (and Hahnemann, whose authority on this point has been confirmed by the testimony of Hufeland,† has recognized the principle) to take *Belladonna*, as a preservative against scarlatina, or to have recourse to *Veratrum album* or *Cuprum metallicum* in cholera, as Hahnemann had advised, and as a large number of Homœopaths in the north of Europe have proved; properties which we have found again and

* *Lecons de Méd. Hom.* Paris, 1825, p. 128 and passim.

† Hufeland, *Traité de Méd. pratique*, p. 465.

again in *Bryonia*, *Nux vomica*, *Acidum Phosphoricum*, for the different epidemics of influenza which have visited us.

I will return, gentlemen, in conclusion, to the method of repeated bleedings, vaunted by M. Bouillaud. Allopathy owes to him its greatest success, and may be justly accused of ingratitude towards the author of this practice, in refusing to acknowledge the fact. Judging from the contempt which he affects to feel for the theory of vital dynamism, M. Bouillaud ought to reckon on the most happy results. Indeed, no one discharges the affected organ more generally than he does; no one facilitates absorption more largely, no one, in fine, weakens more the morbid cause and the vital force. But as the morbid force can never equal the vital force, (for, if these two forces were equal, death would immediately follow;) as, on the other hand, the promptitude of his action enables him to shorten the duration of the pains, which is a cause of weakness, he ought to obtain a more prompt triumph over the morbid phenomena: still there remains the capital vice with which the practice of repeated bleedings is tainted; viz. it cures only one out of 8 or 9. For a disease like pneumonia we can, we ought to do more.

Gentlemen, I here end my reply to the strictures of M. Sanson, in recalling to your mind that, by the discovery of Homœopathy, Hahnemann has realized the wish of the master spirits in medicine, a wish so finely expressed by the greatest genius that has illustrated the art of healing in modern times, Thomas Sydenham. "Iam vero si quaerat aliquis, an ad praedicta in arte medica desiderata duo (veram scilicet et genuinam morborum historiam, et certam confirmatamque medendi methodum), non etiam accedat tertium illud, remediorum nempe specificorum inventio? Assentientem me habet et in vota festinantem. Et si enim methodus sanandis morbis acutis maxime accommoda mihi videatur, quibus ex-

igendis cum natura ipsa certum aliquem evacuationis modum statuerit, quaecunque methodus eidem fert opem in promovenda dicta evacuatione, ad morbi sanationem necessario conferet; optandum est tamen, ut beneficio specificorum, si quae talia inveniri possint, æger rectiori semita ad sanitatem proficeret; et (quod majoris etiam momenti est) extra aleam malorum, quae sequuntur aberrationes istas, in quas sæpe invita dilabitur natura in morbi causa expellenda, (ut potenter et docte ei ab assistente medico subveniatur) possit collocari.

"Ad hanc pariter normam alii etiam morbi aliis evacuationibus curantur; enim tamen quæ adhibentur remedia, non magis proprie competant immediatæ curationi istorum morborum, qui eis sanantur evacuationibus, quibus faciendis ejusmodi remedia maxime proprie designantur, quam *scalpellum phlebotomum pleuritidi*; quod tamen nemo, opinor, specificum hujus morbi facile appellaverit."*

In this direction, gentlemen, lies the truth in medicine: there is its futurity.

[The principles expressed in the above passage are so important, and the opinions of the author of such weight, that we are induced to quote the translation of the passage from Swan's edition of Sydenham, London, 1749.—*Trans.*]

"But if any one were to ask whether, besides the two foregoing *desiderata* in physic—viz. 1. a true history of diseases, and 2. a certain and established method of cure—a third should not be added, namely, the discovery of *specific* remedies? I answer in the affirmative, and proceed to do my part towards it. For though that seems to me the best method of curing acute diseases, which, after nature has pitched upon a certain kind of evacuation, assists her in promoting it, and so necessarily contributes to cure the distemper; it is never-

* Thomas Sydenham, Op. Med. t. I. Prefacatio.

theless to be wished that the cure might be shortened by means of *specifics*, (if any such medicines can be discovered,) and, which is of more importance, that the patient might be preserved from the evils which are the consequence of those errors that nature often unwillingly makes in expelling the cause, even though she is assisted in the most effectual and skilful manner by the physician.

"For other diseases are cured in the same way by other evacuations, and nevertheless the medicines exhibited for this purpose do no more immediately contribute to the cure of the diseases that yield to those evacuations, which these medicines are principally designed to promote, than a lancet does towards the cure of a *pleurisy*; which nobody, I imagine, will call a specific in this disorder."

CASES OF CHRONIC BRONCHITIS.

BY HARRIS DUNSFORD, M. D.,
LONDON.

I. A YOUNG LADY consulted me in November, 1839, for a cough which had affected her for many months. She had been a stout, florid girl, but had become pale and much emaciated. There was copious expectoration of thick mucus. The case was one of chronic bronchitis *verging on consumption*. The pulse was 100. There was fever towards evening, and copious perspiration at night, and she had spit blood twice. The cough was especially distressing in the night, and the patient was often obliged to sit up in bed. The voice was altered and hoarse.

Under the employment of *Hyoscyamus*, the cough, which prevented her sleeping, was subdued in two or three days, but the urgent symptoms remained; I then administered *Stannum* in solution, and the effect was truly satisfactory. It was precisely the homœopa-

thic remedy, and arrested a disease which, had it continued, would beyond all doubt have induced incurable disease in the lungs.

Physicians of the highest repute had attended this patient, and their efforts had effected no permanently good result. On the 28th of December, 1839, the report, as entered in my note book, is the following:—"Has quite lost the cough, is grown stout, and sleeps well." This favorable state continued, and the patient in a short time recovered completely, under the use of the last mentioned remedy, and remains in excellent health.

II. A YOUNG MAN, aged twenty-five, consulted me in March, 1838; about ten years previously, after getting wet through, he caught a severe cold which affected the chest; from that time he had scarcely been free from cough, except in the warmest weather. The cough affected him chiefly at night and in the morning on rising, and was attended with a frothy or gelatinous expectoration; he also suffered from shortness of breath, with constant wheezing, and an occasional fluttering sensation at the heart, which caused him to stagger; his tongue was furred; the pulse 100, and he often perspired at night.

The effect of homœopathic treatment, in this case, was gradual; as from the employment of the following remedies, *Hyoscyamus*, *Stannum*, *Pulsatilla*, *Arsenicum*, and *Phosphorus*, the improvement has been satisfactorily progressive. The patient, from being extremely thin, has gained flesh, the cough has entirely left him, and the wheezing is not perceptible except in foggy or very damp weather. Up to the present time this patient has remained well; and though, from the serious nature of the malady, and the length of time it had endured, the lungs can scarcely resume their former vigor, he has, for more than two years, filled a situation which requires constant exposure to every change of weather, with merely temporary and slight inconvenience.

REPORT

OF THE

DISEASE AND TREATMENT

OF

HIS EXC. FIELD-MARSHAL COUNT RADETZKY.

BY DR. HARTUNG,

IMPERIAL COUNSELLOR AND STAFF SURGEON, J. A.

His Excellency is now nearly 80 years of age, and has been for 57 years in active service, yet is his mind perfectly free and active, in spite of the many hardships inseparable from his profession; which, however, may be accounted for by a naturally irritable temperament and early habits of activity.

Nevertheless, with the best constitution of body and the most excitable temperament, with unclouded activity of mind, physical sufferings will arise; and accordingly His Excellency had already for many years suffered with a cough, arising from an irritability of the mucous membrane of the larynx, without disease of the lungs. To this cough, however, His Excellency paid no attention. For several years previous to 1836 His Excellency was every autumn affected with inflammatory catarrhal fever, which, however, was relieved by a few days' rest and a little medical aid.

In 1836 His Excellency had the misfortune through accident to fall upon the sharp corner of a sofa, and to bend inwards the 6th and 7th ribs, which caused a violent inflammation of the lungs, which, too, yielded to a medical treatment of 7 days, without any thing remarkable occurring; unless it be that on the 7th day the patient expectorated about 10 or 12 oz. of a very fetid pus, and that ever since, though the habitual cough remained, the febris

catarrh. inflamm. has been omitted. This expectoration was probably caused by the supuration of some tubercle in the lungs.

The years 1837 and 1838 passed off well, with the exception of some slight indisposition—with only, as there had also been before, occasional headaches in the forehead, some eructations from the stomach, and diarrhœa, without, however, further development of disease, these symptoms being likewise relieved by appropriate medicines.

In July and August, 1839, His Excellency was attacked with vertigo, almost to falling, from congestion to the head; yet also this affection disappeared as His Excellency left Milan and went to Pordenone to a review of troops. There appeared soon after, however, a pressure in the right eye with inflammation of the eyelids, lachrymation, occasional protrusion of the eye, and pressure in the forehead. By the remedies indicated this difficulty was alleviated; but the under eyelid remained inflamed.

Alternating thus between more and less inconvenience, approached the spring of 1840. In May His Excellency was attacked, but once only, with vertigo. Through July, August, and September, during the concentration of the troops, His Excellency found himself well, with the exception of the right eye, in which the lachrymation continued.

On the 9th day of October, at a great review near Cartiglione della Stiviere, His Excellency exposed himself on horseback during five hours, alternately to a scorching sun in the valleys and a cool light wind on the heights.

Soon after, his face became red; towards evening a violent fever set in, with such a headache in the right side of the forehead, that His Excellency, though not usually complaining, assured me that were it to continue long he would not be able to endure it. The eye was much inflamed and somewhat protruded from the orbit; the pulse was full,

hard, and apoplectic. I administered what I thought the most appropriate remedies. About one o'clock that night the headache left, the eye returned to its place, and the following day His Excellency attended the church-parade, let the troops defile, and was on horseback six hours. In the evening His Excellency appeared well, except some weakness. The next day he rested, and then set out on his journey to Milan. The right eye was still red and continued to lachrymate.

In Milan, by means of continued treatment, the cure so far progressed as to leave only a redness of the lower eyelid, lachrymation, and a swelling at the external angle upwards into the orbit, yet without pain and without injury to the vision.

Towards the end of October His Excellency travelled to Verona, and was absent six weeks. During this time he went to Modena in very unpleasant, cold, wet weather. Here it happened that a swelling of the size of a bean, commencing at the inner angle of the eye, began to form near the lower lid; the previously described tumor in the orbit at the external angle increased, and the eye protruded considerably from the orbit, with occasional pain in the frontal cavity, and violent congestion to the head. Eight days after this, His Excellency returned to Milan: I found matters as above described. The situation appeared to me critical, for I clearly perceived that a fungus had formed in the orbit, the growth of which was to be dreaded. I applied emollient poultices to relieve the inflammation that had extended over the entire cheek. They answered the intended purpose; but I omitted them as soon as the external inflammation subsided, in order that their longer application might not injure the eye, and continued the further treatment with the view, if possible, to limit the growth of the fungus, then to restore the organ to its usual tone and to remove the depression of mind. The med-

ical treatment was pursued according to Homœopathic principles; the medicines which were administered and repeated according to circumstances were the following—the object being not only to prevent an increase of the fungus, but also to retain the general health of the patient, and to preserve life, as an apoplectic attack was greatly to be apprehended—viz.: Acon., Baryt. Carb., Zinc. Met., Anacard., Calc. c., Euphr., Merc. Hahn., Merc. Sub. Corr., Ant. c., and Digit. These are the principal medicines that were given from time to time, changing according to the *ensemble* of the symptoms, and indeed with intercurrent doses of several palliatives.

The consequence was, that, on the whole, His Excellency found himself well, with the exception of frequent congestions to the head. The mind recovered its wonted vigor as the body was restored to its usual activity. The growth of the fungous tumor alone could not be stayed. The tumor above the external angle, which had become more notable by its purple color, as well as the tumor at the inner angle, had rather increased in extent, and between the eyeball and the nether lid projected a fungus-like, elastic, granulous, purple, painless swelling; by which changes the eye was not only protruded, but turned from its normal axis of vision, so that the pupil stood looking outwards and upwards, and the eye was restricted in its motions, without, however, producing any injury to the power of vision; for only yesterday His Excellency wrote a letter without spectacles and attended to other business.

In order to procure the opinion and counsel of another physician, Professor Flarer of Pavia was called yesterday. His diagnosis concurred with my own; his prognosis was also in accordance with mine, but rather more unfavorable. His remark was, "We can do nothing at all in the case." I remarked to him, however, that His Excellency's mind might be too much af-

fectured by the communication of this opinion : we therefore finally agreed to order Merc. Corr. $\frac{1}{4}$ gr. per dose, once a day.

Miland, January 7, 1841.

CONTINUATION.

As stated in my report, dated Jan. 7, Dr. Flarer, Prof. of the Diseases and Treatment of the Eye in Pavia, had stated without reserve to myself and others, *the day before the report was made*, that in this case neither Allopathia, Homœopathia, Hydropathia, nor any other mode of treatment could effect a cure ; that His Excellency must die, either from a consumption or an apoplexy ; that he, Dr. Flarer, could prescribe nothing. I besought the Professor, in order to afford His Excellency some comfort, to recommend something in my presence. Accordingly he ordered the *Merc. Sub. Corr.*, as stated in the preceding report, $\frac{1}{4}$ gr. daily, in the firm conviction that it would give no relief ; but, as he said to me, " he knew of no remedy more appropriate." I followed his advice, but gave only $\frac{1}{12}$ gr. ; but even this His Excellency could not bear, as very severe congestions to the head succeeded, and I was forced therefore to give the antidotes in order to relieve it.

It was at this period that I prepared the account of the disease, and handed the same to His Excellency, to have it sent by him to Vienna, my official station imposing this upon me as a sacred duty, as I then conceived.

The report came to the knowledge not only of the Princes and Archdukes, but of His Majesty, our most gracious sovereign. His Majesty was pleased to send to Milan the K. K. Imperial Counsellor, Staff-Surgeon, Dr. Jager, Professor in the Joseph's Med. Chir. Acad., to consult with me, and joined with me to use every possible means to preserve His Excellency the Field-Marshal.

In the mean time I endeavored to preserve

the system in general in good condition, keeping in mind the increase of the fungus. This growth I could not prevent ; it rather increased, so that, if I can render myself intelligible by a figure, it formed on the external angle in the region of the lach. gland, a hard, puffy, grayish-blue excrescence more than eight lines broad, which, extending in an arched form across the upper eyelid, gradually became narrower, and finally flattened down. Then again, from this angle below the under lid a grayish-blue elevation appeared, which, towards the eye, formed a perpendicular wall, and towards the nose gradually lost itself. The bean-sized swelling which protruded between the ball of the eye and the lower lid had increased to the length of a $\frac{1}{3}$ of an inch, free, plainly exhibiting the fungous nature of the product which had formed around the whole circumference of the eyeball, while the latter over the external angle was only exhibited in the gray blue color of the skin, and could not be immediately discovered. In the whole fungous formation different sensations, as sticking, tearing, burning, and itching, were felt ; slight hæmorrhages occurred ; the eye itself was free from pain, and stood as it were in a furrow between these two elevations ; it was protruded from its orbit, and, as before, directed upwards and towards the external angle, but now entirely immovable ; the power of vision likewise began to suffer, for towards the external angle His Excellency saw objects as black bodies, without being able to distinguish what they were. The conjunctiva was softened, and was of a dark red, approaching blue. In the morning the lids were closed with a whitish, pus-like, sticky mucus ; during the day there was increased sensibility of the eye to light, a lachrymation, at evening increased heat, dryness and pain. At this stage had the disease of His Excellency advanced when Dr. Jager arrived at Milan on the 25th of January. Professor Flarer was sent for and

arrived at noon on the 26th ; we three assembled to express our several opinions and to decide upon future proceedings. Dr. Jager pronounced the case incurable, that it arose from a *dyscrasis*, and that the operation could not be of any service. Furthermore, that he knew of no remedy for internal use.

Dr. Flarer expressed himself again as he had already done before :

"I must, according to the views of the old school, and my own experience of forty years in the same, entirely accord with Prof. Jager."

It was difficult now to reveal this opinion even in part to His Excellency without disturbing and diminishing his confidence in me. The how? the when? and what? were told and explained, that His Excellency might continue his confidence in me and in my medicine. In time hæmorrhages and pains might occur and the tumor might ulcerate ; in which case I then would administer the appropriate remedies. Professor Jager, out of true regard for His Excellency, made his Imperial Highness, the Viceroy, also acquainted with this, and after four days' stay in Milan, pressed my hand and returned to Vienna. On an occasion, as his Imperial Highness honored His Excellency with a visit, he remarked to His Excellency "that he should put full confidence in me and my remedies."

At my next visit His Excellency embraced me and used the following words : "My friend, now that they are all gone I remain in your hands ; do with me as you will, I have full confidence in you, and will no more see any other physician."

These words affected me deeply. Two learned and experienced physicians and professors had pronounced with absolute certainty the incurability of the disease, to which I could not but assent ; here in Milan several reports were spread abroad, and I received several curious letters ; in short, I was in a most de-

sponding condition. Day and night the image of His Excellency was before me. But I considered at length that Prof. Flarer and Prof. Jager, though experienced Allopathic physicians, were no friends of Homœopathia ; that I had already cured many cases according to the Homœopathic principle, that had been pronounced incurable by the old school ; I reflected that rumors were words that ought not to disturb me ; and I went on boldly and with a quiet confidence in my adopted course.

The result thus far has been favorable ; for the hæmorrhage, which had already begun, and the threatening transition to schirrus, have subsided ; the pains have entirely disappeared ; the upper swelling which had formed a protuberant excrescence above the lachrymal gland, exhibits now only a slight elevation ; the upper margin of the orbit is free ; the hard swelling at the inner angle, as well as the tense tumor or visible fungus between the eyeball and the lower lid are so very much diminished, that His Excellency can again look downwards towards the nose, and can distinguish objects as well as before ; the eye moves again freely in its orbit, and that, and the surrounding parts, have assumed their natural color. For the rest, His Excellency has regained sound health, the mind is in full strength and the body in activity and force. I continue the Homœopathic treatment. Whether I shall succeed further in producing a still better state of health in the case of His Excellency, considering the well-known malignity of the disease, particularly in a person 80 years of age, and that it has never as yet been cured—on this I am not able to form a prognosis ; and if I should not succeed in curing his eye, I shall yet esteem myself happy if I can preserve His Excellency in his present state of health.

Milan, February 19, 1841.

CONTINUATION.

The treatment, (Homœopathic,) referred to in my report of February 19, has been continued. The consequence has been so favorable that I am induced to prepare a drawing to exhibit it more perfectly. From this favorable evidence, we may entertain hopes of a complete cure, since, of this fearful disease, which in its greatest circumference attained to more than four inches, there now remains only a small fungous tumor, that is visible only by drawing down the under lid, while His Excellency otherwise enjoys excellent health. Though this is the case, yet it is not to be forgotten that a fungus on these important parts, and of such extent, and particularly in a person so aged, has never yet been cured; wherefore I dare not express myself further respecting the cure, till this little tumor shall also have disappeared. The operation of the principle *similia similibus* was in this case remarkable. Only two remedies were requisite, of which, every eighth day at evening, and on the morning of the ninth, three pellets moistened with the decillionth dilution, together with the external application of the same, were exhibited. After each dose His Excellency had a sensation of all his previous sufferings, but without pain, and as it were like a breath passing over him, after which the favorable action of the medicine appeared.

The result I will make known at the proper time, and will add here only this remark, that His Excellency appears perfectly well, travels, walks, rides, and all this with serene mind and good spirits.

Milan, March 16, 1841.

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CONTINUATION.

In the last report I already stated that the eye of His Excellency moved freely in the orbit, the power of vision was restored, and the fungus had disappeared, excepting a small tumor in the internal part of the nether lid,

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which I made evident by the drawings, with the remark that His Excellency enjoyed good health, and added that Homœopathic remedies had been administered, and how they had acted. I have since continued the application of *similia similibus*, and can say with pleasure, that even the tumor on the under lid has nearly disappeared, there being merely a scarcely observable projection of the lid remaining. This was the case previously, and it often shows itself in aged persons without disease, from a natural laxity of the muscular power; so that it is possible that this may remain without injury—perhaps, also, not.

That the frightful disease is already removed is evident from the external appearance, as this eye does not protrude beyond the other, and its vision is perfectly restored; and it is furthermore confirmed by the fact that His Excellency goes about, travelling, riding, and performing his other duties with eyes perfectly clear. On the 19th of last month, the birthday of Our Most Gracious Emperor, His Excellency remained on duty at the immense cathedral, and at a low temperature, an hour and a-half, with clear eyes, after which the troops paraded, and he exposed himself for more than an hour to the sun; a change of temperature of more than 15 degrees. Neither produced any change in the eye. In the evening His Excellency was in a saloon illuminated with more than 100 candles, in a company of 50 persons, without feeling the least inconvenience in his eye. Yesterday and to-day His Excellency remains as before described, in his former mode of life, without any injury to the eye; from which we may conclude that the disease is cured and that no farther reports are required.

Milan, April 22, 1841.

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CURE OF THE EYE DISEASE OF HIS EXC., &C.

From the foregoing accounts it is seen that the disease was considered as of a very dangerous character, and by Professor Jager, as

well as by Professor Flarer, declared to be incurable. I myself could not certainly promise a cure, as it was well known to me that no patient of such advanced age had been cured of such a disease.

But deeply impressed with the words of His Excellency, and deserted by the old school, which offered no remedy, I clung to the views resulting from an experience of many years, and resolved to base and regulate my treatment in this case, as in all others, on the principles of Homœopathia. The decision of the professors spread consternation in the family, and among other distinguished persons. Many proposals were made to His Excellency; letters of various contents were sent, and charlatans were sought, and in Milan there were even those who were desirous to see the funeral of a Field-Marshal. Not unfrequently I had to hear remarks such as, "here Homœopathia shows itself; had the Homœopath sought counsel earlier, the eye might have been extirpated—now it is too late," and much more of the same. With all this his Excellency remained firm, as might have been expected from a man of his sense.

At the consultation, on the 26th of January, when Professors Jager and Flarer had both pronounced the disease incurable, and prescribed nothing, I remarked to them that I would give *Ars. x*, 6, then *Psorin*, *Herpetin*, and *Carb. An.* To which Dr. Flarer remarked, with a sneer, "burnt steak!"

EFFECTS OF THE MEDICINES, AS SUCCESSFULLY INDICATED AND GIVEN BY ME.

Arsen. alb., x. 6, produced on the first day severe pain in the whole head, together with considerable congestion thereto; the night was restless;—the 2d day, the same state continued, the night sleepless—3d day, the headache subsided, diarrhœa set in, the night more quiet—4th day, weakness, sleeping, continued

diarrhœa, the growth of the fungus increased, the eye more protruded.

Psorin, x. 6, administered on the morning of the 5th day, produced, on the first day, a pressure in the right eye, severe pressing headache, which extended to the upper jaw; the night passably quiet—2d day, like the first, only the pressure in the eye was less—3d day, the pressure on the eye, as well as the pressing headache left, otherwise no change—4th day, no change, only the fungus continued to increase; there occurred a slight hemorrhage.

The following day I gave *Herpetin*, x. 6—1st day, pressure in the head, with vertigo, which subsided towards night, the night quiet. 2d day, little headache, with slight vertigo, painless rumbling in the hypogastrium, at evening a liquid stool, quiet night—3d and 4th days, no pain, otherwise no change, increase of the excrementum, slight hemorrhage continued.

The next day I gave *Carbo Animalis*, x. 6. 1st day, pressure in the right side of the head, itching in the internal angle of the right eye, increased lachrymation, quiet night—2d day, like the first, the night quiet—3d day, the pressure in the side of the head ceased, but the itching in the angle and the flow of tears increased—4th day, no change in particular.

The hemorrhage ceased and His Excellency felt himself relieved and well, the fungus did not increase but remained unchanged. I allowed the remedy to act 2 days longer, but no alteration occurred.

I perceived now that the first three remedies had aggravated the disease; the last had checked it, but effected no improvement. I then considered that I had cured very much enlarged and indurated tonsils with *Thuja Occidentalis*, in alternation with *Petroleum*; that with the internal and external use of *Thuja*, alternating with *Graph.* and *Sulph.*, I had cured several cases of watery excrescences; and with *Thuj.* in alternation with *Carb. An.* I had cured two schirrous breasts. I resolved ac-

cordingly to make an experiment with *Thuj.* and *Carbo. An.* I ordered *Thuj. Occid.* x. gtt. j. Aq. dist. ℥ij. M. D. S. a table spoonful to be given three times a day. The first day appeared all the symptoms that His Excellency had occasionally suffered from for years, as headache in the right side of the forehead, cough, particularly at night, slight diarrhœa, pain in the kidneys, with a red sandy sediment in the urine, itching, and a reddish rash-like eruption on the inner side of the thigh; the night was quiet, with the exception of the cough—2d day, the same, only if His Excellency attempted to show me where the pain was, it was gone to another place, like a breath—3d day, no more pain, itching in the inner angle, secretion of a milky and rather sweet cream-like moisture on the whole extent of the fungus. I now ordered *tinct. Thuj. Occid.* gtt. vj. Aq. Dist. ℥jv. M. D. S., the eye or the fungus to be moistened with it every 2 hours—4th day, no pain, the secretion increased, the fungus, particularly on the upper margin of the orbit, appeared to be diminishing. 5th, 6th, and 7th days, no pain, the secretion increased, the lower part and the fungus within the underlid diminished, to the astonishment of all who had previously seen it. The external application of the *Thuj.* was continued.

The following day, as the 8th after the *Thuj.*, I gave *Carb. An.* x. 3. Effect, 1st and 2d days, as after the *Thuj.*, the pain in the forehead appeared, only it extended itself to the left side, and to the ear, like a breath passing over. The secretion continued, no pain in the eye. The 3d, 4th, 5th, 6th, and 7th days, no headache, the secretion continued. I now every morning touched the protruding fungus with a fine pencil, moistened with the 4th dilution of *Carb. An.* The *Thuj.* was continued on the circumference. The fungus diminished, and the eye retreated into its orbit.

These two remedies, *Thuj.* and *Carb. An.* were continued in alternation every 8 days, in the aforesaid doses, and the external use of both was kept up. The consequence was, a success beyond the expectation and to the astonishment of all, that in $1\frac{1}{2}$ months the whole fungus had disappeared, and the eye, with complete power of vision, moved as well as the other in its orbit, only on the margin of the lower lid there still remained a little fulness, and the eye wept. These, however, were subsequently relieved.

Since that time His Excellency has made several journeys in every weather, to Verona and to Venice, without feeling any injury to the eye; I therefore feel authorized in saying that this disease, pronounced to be incurable, has been cured, easily, quickly, and permanently, according to Homœopathic principles.

It is remarkable, and may well confirm the idea of permanency of cure, that His Excellency, who previously enjoyed good health, yet had occasional one-sided headaches, almost always a cough, (from exposure on the field in time of war,) without disease of the lungs, occasional pain in the lungs, itching in the anus, some eructations, which affections have all vanished with the cure of the fungus, and His Excellency is in perfect health.

DR. HARTUNG.

Milan, June 12, 1841.

[The extraordinary cure of Field Marshal Radetzky, accomplished in direct contradiction to the predictions of Professors Jager and Flarer, produced a marked excitement throughout German Europe, greatly to the advantage of Homœopathia and detriment of Allopathia. To counteract this impression, an anonymous scribbler, possessed of the same spirit that troubles some of the Allopathists, even on this side of the Atlantic, assailed the personal standing of Dr. Hartung, with the hope of

exciting distrust as to the reality of the cure. The following testimonials were immediately elicited, and have silenced the efforts of Dr. Hartung's opponents.—*Ed.*]

"I hereby certify that Dr. Hartung, imperial Counsellor and Staff Surgeon, during a service of 10 years in the Lombardo-Venetian army, has discharged his duties with the highest success, and has, by a careful inspection of the hospitals under his direction, deserved the thanks of government. Many patients in a hopeless condition owe their lives to his zeal and science. I personally owe him everlasting gratitude; he saved my life in a disease, which by the most experienced physicians had been declared incurable.

"*To him alone* therefore I owe my preservation, *and to him alone*, I owe it that I am still able to fulfil those duties which our most gracious sovereign, the Emperor, has been pleased to assign to me.

"RADETZKY.

"M. P. FIELD-MARSHALL.

"*Milan, April 4th, 1842.*"

Extract of a letter from the Countess von Wenckheim, daughter of his Excellency, dated May 17, 1842.

"I can not leave Milan, my dear Hartung, without expressing to you my gratitude for the cure you wrought in my dear father. I pray you to be assured that I shall never forget your assiduity on that occasion.—My expressions are those of a daughter happy in the consciousness that she leaves a beloved father restored to his former health."

HOMŒOPATHIC THERAPEUTICS.

TRANSLATED FROM DR. BEAUVAIS' EDITION
OF DR. BIGEL.

BY

JAMES M. KITCHEN, M. D.

No. XII.

INFLAMMATION OF THE LIVER.

Inflammation of the liver is either acute or chronic—the diagnosis is not difficult—the local symptoms are evident—frequently, however, there are superadded inflammations of the diaphragm, peritoneum, stomach, &c. The general diagnostic signs are—pain fixed, continued, first appearing in the right hypochondrium, just under the false ribs, sometimes extending to the pit of the stomach, and even up into the chest—the pain is piercing, burning, cutting, binding, sometimes very severe, at other times dull, pressing, or felt only during deep inspiration or coughing, when the patient lies on the left side, or by external pressure. The region of the liver is exceedingly tender, and strong pulsations may be felt and seen; it is tense, hot, even swollen, and occasionally covered with red patches. Pain at the top of the left shoulder is ordinarily felt, also in the clavicle and arm, with a sensation of numbness or palsy. The respiration is painful, anxious, interrupted, sighing—sometimes there is a cough, dry, deep, and hollow—the pain, the cough and the anxiety increase when the patient lies on the left side, and sometimes he is obliged to rest on the back, or sitting on a chair—he dares not sneeze—this condition is the most often accompanied by a violent inflammatory fever—the pulse is more or less hard, very frequent, irregular—there are also hiccups, nausea, eructations, sometimes abundant vomitings,

without relief, or rather with increase of symptoms, a peculiar feeling of fulness, uneasiness, heat and anxiety in the pit of the stomach, bitter taste, yellow tongue, more or less jaundiced hue, constipation, or hard, clayey stools. Changes of temperature, hemorrhoids, violent emotions, ague, sorrow, recession of an eruption, obstructions of various kinds, &c., may become occasional causes—also bad food, stimulating drinks, &c.

If the inflammation be caused by sorrow, there is almost always an affection of the stomach with it—the icteric symptoms are predominant, which may lead to the belief that the parenchyma of the liver is severely attacked. *Chamomilla* 9 or 12, will often cure in a few hours; but this is not the only case in which this remedy may be indicated. If, for example, the pain be dull, pressing, do not increase by pressure, change of position or breathing—if there be stricture in the stomach, tension in the precordial region, and oppression of breathing, if the bilious symptoms be predominant, if the jaundice be evident &c., in such cases *Chamomilla* should be first given. *Pulsatilla* is indicated when the fits of anxiety, very frequent, are more so at night, and when, instead of constipation, there are frequent mucous, green, watery passages, with inclination to vomit.

Should the patient be constipated, with less prominent icteric symptoms, with cramps of the chest, *Bryonia* is the remedy. Sometimes *Belladonna* is the most serviceable means. In chronic cases, characterized by a tenderness in the hepatic region, by a yellow hue, by a pain, sensation of pressure and tension in the epigastrium, by an irregular appetite, strong thirst, and agitated nightly, *Belladonna*, in attenuation, with one of the medicines enumerated in the treatment of Hepatitis, is the remedy from which we may expect the most beneficial results. When the disease is not too inveterate, we often succeed with *Belladonna*

in conjunction with some antipsoric; and even in those affected with very inveterate chronic affections, we may often bestow a condition of health relatively good; but it takes a long time, and especially so if we do not resort to the antipsorics, *Natrum*, *Murias Magnesæ*, *Natrum Muriaticum*, *Antimonium Crud.*, *Ammonia*, *Lycopodium*, *Kali Carb.*, *Sulphur*, *Carb. An.*, *Assa*.

Acute Hepatitis may be cured by *Belladonna* alone, and above all when it is the convex surface that is affected—the pain is the less piercing than dull, and extends up into the chest, even to between the shoulders, accompanied by a distension of the pit of the stomach, and an insupportable binding across the belly, above the navel, which makes the breathing painful, and causes anxiety, with congestion of blood to the head, which is confused, with dimness of sight, and giddiness, as in a fainting fit; if to these symptoms be added great thirst, agitation, sleeplessness, &c., *Belladonna* alone will put an end to this condition. An excellent remedy in many similar states of the system is *Nux*, especially if there be gastric symptoms, and the patient of a choleric temperament—if there be a piercing pain in the region of the liver, which is painful to the touch, with pulsation, &c. if there be constipation, sour and bitter taste, loss of appetite, disposition to vomit, and even vomiting, stricture, oppression, short breathing, as if the clothes were too tight, with increase of oppression when the patient undresses, burning thirst, frequent hard pulse, urine of a deep red and scanty, tensive headache. *Aconite* is seldom suitable in cases where the pulse is frequent and hard—more so in Hepatitis, which is accompanied by an accelerated, soft, full, and sometimes irregular pulse.

Another remedy no less valuable than the above is *Mercurius Solubilis*, which ought to be given when the patient complains of bitter taste in the mouth, of thirst without hunger, of

constant shiverings, of pressive pains in the hepatic region, preventing reclamation on the side; when the icteric appearances are very apparent, with frequent attacks of anxiety. Antimon. Crud., China, Pulsatilla are also very good remedies in such cases.

In the Clinique Homœopathique, 2045th observation, Dr. Hartmann says—I will not deny that, in this disease, some other remedy may be preferred to Aconite, but we should not, on that account, refuse to acknowledge its curative effect. I am well persuaded, since I have been taught it by experience, that Aconite is a remedy, which, far from being despised, is often indispensable in inflammations of the liver, chiefly when the patient complains of a burning and piercing pain in the hepatic region, beneath the false ribs of the right side, rendering the respiration painful and anxious, and exacerbated by a dry, short cough—the diseased part is tight, swollen and hot—synochal fever very high, with a pulse rather hard, full, quickened, and dry heat.

In the 2046th observation he says :

Mercurius Solubilis is often an excellent remedy against inflammation of the liver, and especially so when other means have already diminished the violence of the fever ; since, as long as the inflammatory symptoms are very high, it is not suitable. It corresponds best to those cases in which there are intermittent chills and free perspirations ; the local symptoms are—pressing, piercing pain in the liver, the attacks increasing in violence, preventing respiration and causing extreme agitation and restlessness ; the patient lies in preference on the diseased side, hangs down his head, but this can be supported a short time only and must soon be changed. Constipation, icteric hue, bitter taste, inappetence, root of tongue coated yellow, urine high colored, staining the linen yellow, great thirst, and if cold drink be taken, the pains are increased.

In chronic cases, with pains that are

more dull than piercing, returning periodically, with evident swelling of the liver, yellow hue, great depression, Mercurius is a most excellent intercurrent remedy. I have seldom given it stronger than the 6th or 12th dilution.

In the 2047th observation, the same author remarks :

Bryonia is chiefly indicated when there is piercing and burning pain in the right hypochondrium, accompanied by a feeling of fulness and tension in this region, which extends up between the shoulders and excites in the chest spasmodic affections, all which above symptoms are aggravated by inspiration ; they are also increased by motion, change of position, and pressure. The accessory symptoms are swelling and tightness of the belly, constipation, jaundice, nausea and vomiting, tense headache, chiefly over the forehead, the accompanying fever is more or less violent, according to the extension of the inflammation. When the fever is high, we cannot dispense with a dose or two of Aconite ; if it should require particular attention, Bryonia is indicated ; the 12th and 24th dilutions should generally be used ; I have met with cases in which I have employed still lower ones.

In the 2055th observation, Dr. Weber says :

I have treated and cured several inflammations of the liver. I gave at first three or four doses of Acon. $\frac{2}{36}$, then according to the symptoms, Bryon., or Merc. Solub., Bellad., Sulph. An inflammation of the liver to which was added a pneumonia, in a widow 64 years of age, was perfectly cured by Aconite, Nux, Bryon. and Bellad.

In the 2076th observation, Dr. Schwarze speaks very highly of the great benefit derivable from Murias Magnesiae in chronic cases.

In observation 128th of the supplement, Dr. Hartmann says, in relation to biliary calculi. The principal remedy employed by me during the spasmodic attacks, was always Ipecac. $\frac{2}{3}$,

every half hour ; during the remission I gave sometimes *Nux* or *China*, and at other times *Mercurius* or *Bryonia*. This last, as I was well convinced, prolonged the remission in a case under my charge, so that I repeated it in the following remission, they producing more promptly the wished for jaundice, which soon yielded to one dose of *Digitalis*.

COMMENTARIES ON THE

JOURNAL DE LA MEDECINE HAHNEMANNIENNE,

BY C. CROSERIO, M. D.

OF PARIS.

(Continued from page 45.)

Page 201. *NUX MOSCHATA*—Translated from the German of Dr. Helbig.

Dr. Molin follows up this translation with clinical remarks, and adds that it is indicated in hysterical difficulties, and that Hahnemann does not hesitate to place it almost on an equality with *Sulphur*, on account of its frequent utility.

A woman thirty-four years of age, of a highly nervous temperament, of a good constitution, which a great moral organization induced her to abuse incessantly by excessive labor, of such strength as nature grants to but few persons, experienced, eighteen months ago, a nervous irritation of the digestive canal. Among the various symptoms which this disease presented, one of the most painful was an enormous distention of the abdomen and stomach, which recurred every day after dinner ; the least vexation or disappointment caused it to return.

A treatment of considerable duration had

produced no effect ; when, by the advice of Hahnemann, she took two globules of the 30th dilution of *Nux Mosch*. The dose was repeated eight days after, and in fifteen days the distension had entirely disappeared.

The Marchioness of C., twenty-four years old, of a nervous temperament, of a strong constitution, was attacked, six years ago, with violent pains in the head, over the right eye ; these pains, excessively sharp at times, are compressive, burning, or shooting. They are accompanied by redness of the face, pinching of the lips, contraction of the jaws, difficulty of speaking, &c. ; several times, when they have been very severe, she has experienced sensations of numbness and weight in the calf of the left leg. For a long time the medical attendants have suspected that she has a chronic inflammation of the meninges.

Last winter I was called to attend her. She was then in one of her slightest attacks ; suffering quite sharp pains, but without having lost the power of speech or consciousness. The *Sulphur*, which I administered very carefully, and after the exhibition of *Ignatia* and *Pulsatilla*, gave to the symptoms so great a development that the state of the patient became truly alarming. She lost consciousness and the power of speech ; by a kind of automatic movement, she kept incessantly bringing her hand to the seat of pain ; the face became distorted, and the head was tossed incessantly from side to side by a convulsive movement ; the muscles of the face were violently contracted, and the commencement of a distortion of the mouth even was visible. Alarmed by this serious state, to which I in vain opposed *Belladonia* and *Opium*, I called in Hahnemann. After one of those searching examinations which he, and only he, knows how to make, *Nux Moschata* was administered in the following manner : one globule of the 30th, in twenty teaspoonfuls of water ; of this mixture a tablespoonful in a tumbler full

of water, and a tablespoonful to be taken, and to be repeated in four hours. Two hours after the first dose, all the symptoms were checked. It is impossible within the present limits to give the continuation of this disease, which I will some day publish entire, as one of the most beautiful illustrations which it has been my good fortune to gather under the eyes of Hahnemann.

A lady, thirty three years of age, of lymphatic temperament, having been attacked, three years since, with *Ascites*, symptomatic of an engorgement of the liver, a disease of which she had been cured by our late friend Dr. Gaynaud, was, for two months, a prey to convulsive motion of the head from before backwards, to such an extent that speech and deglutition had become almost impossible, and she could with great difficulty swallow broth and milk.

She experienced acute drawing pains towards the nape of the neck and in the whole back of the head. Antispasmodics and revulsives had produced no relief; her general health was beginning to give way; there was swelling of the face, and a slight œdema of the inferior extremities. I prescribed *Nux Mosch.*, one globule of the 30th in ten spoonfuls of water, one every morning. At the third spoonful, the motion had diminished, speech became a little more free, and the patient was able to eat a little. At the expiration of fifteen days the cure was complete, and, up to the present time, six months since her cure, she has experienced nothing of a similar nature.

No. 4. April. P. 244—Homœopathic clinic, by Dr. Curie, translated from an English Pamphlet by that author.

P. 263. Three cases of Anthrax by Dr. Gastier.

Case I. Was that of a poor vinedresser, who had a carbuncle on the right corner of the lips. The Doctor gave Bryonia, 5 gtt, j. in $\frac{3}{4}$ of

water, a spoonful every hour. Five days afterwards the patient resumed his customary labors in the vineyard.

Case II. A woman 46 years of age had a carbuncle on her back, which in 24 hours reached the size of a half an inch in height, and was accompanied with violent pains, and fever, and on opening discharged a fœtid ichor through three small apertures. Silicea in 24 hours relieved all these symptoms, and the wound healed in a few days without any further accident.

Case III. A man and a woman, both 46 years old, and living in extreme poverty, had flayed a cow that had died with a carbuncle, and had cut off the fat and the meat with the intention of using it as food for dogs, which he kept for training. Three days afterwards, two carbuncles formed on the backs of their hands. The woman was treated Allopathically and died on the fifth day, the man took Arsenicum on the third, and on the 5th day he was able to attend to his customary business.

P. 289. Continuation of the Introductory Lecture of Dr. Leon Simon.

P. 301. Dialogue between an Allopathic and a Homœopathic Doctor, by Dr. Crepu. This is a spirited critique of the leading principles of Homœopathy and of Eclecticism in medicine.

No. 5. May. P. 325.—On the poison of snakes, translated from the German of Const. Hering, M. D., by Dr. Jahr.

P. 365. Continuation of the Homœopathic clinique of Paris.

P. 377. Miscellaneous matters, continuation of the discussion between the editor, Dr. Molin, and M. Murn. We pass in silence this article, which we, like every other friend of Homœopathy, regret to meet with.

P. 394. On Isopathy. Reduction of small-pox to vaccination. Dr. Thiele of Casan publishes in the 37th number of the Journal de

l'Art de guerir, a number of experiments, by which he seems to demonstrate that the virus of the pustule of Variola, if inoculated on the udder of a healthy cow, produces in five days the true vaccine pustule, and he draws as a conclusion from these experiments, 1st, That vaccine, or the variola of cows, is a disease which is not proper to these animals: it is there formed by transferring the human variola from the human subject to the cow, and that the source of vaccine is to be looked for in man and not in the cow, as has been thought till now. 2d, That the disease, thus formed in the cow, is transferrable to man and produces there the identical disease, but in a slighter degree, and that the latter is thus protected against variola. 3d, That we can produce vaccination, without the intermediate aid of the cow, by weakening artificially the variola. 4th, That this new kind of vaccine has all the known qualities of the common kind, but in a degree still more benign to the human species. 5th, That the results, thus obtained, justify the hope that we may yet find remedies analogous to vaccine for all epidemic and contagious diseases.

P. 401. 86th Anniversary of the birth day of Hahnemann. Report of the fête given to Hahnemann at his hotel, April 10th, 1840.

P. 403.—Advertisement of a new Manual of Medicine, by Jahr, 2 parts in 4 volumes, large 12mo.—The first volume has appeared; it contains an abridgment of the effects of drugs from Aconite to Kreasote. The author has appended to this edition all those drugs added before by Hering, and has by particular signs distinguished the curative from the pathogenetic symptoms, and those which unite both qualities.

No. 6. June, P. 405.—Continuation of the translation of the poison of snakes.

P. 453. On the influence of the body on the mind, considered in a therapeutic point of view, by Dr. Gastier. This is a long and
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tedious dissertation on the importance of moral symptoms in the formation of a diagnostic, and the selection of a remedy, all of which is nothing but a repetition of the principles of the master. The author supports his views by the relation of two cases, in which he thinks a due regard paid to those (moral) symptoms alone led to the removal of the disease. One was a case of Hysteria, cured by Bryonia, the other of Disury, cured by the Nitrate of Silver.

P. 476. Extracts from German Homœopathic Journals.

I. Typhus in a young man. The patient was thirty-two years old, sick for several weeks; second period of the disease; under Allopathic treatment he became excessively weak. Emaciated, wild expression, eyes fixed and shining, a circumscribed, bright red spot on the cheek: strong pulsations of the carotids, tongue dry and brownish black: the belly neither swollen nor hard, but sensible to the touch in the umbilical region; reddish, watery diarrhœa every hour or two. The patient was stupified with half sleep alternating with delirium; difficult respiration, worse in the evening than in the morning.

He took every three hours *Bryon. i. gtt. j.*, and *Arsen. viii. gtt. j.* He soon had a refreshing sleep, a general perspiration was established, and the diarrhœa was diminished; miliary eruptions showed themselves on the back and extremities. At the end of five days he took only *Ars. viii. gtt. j.* morning and evening; three days after, only in the evening. In *ten more days* he was completely cured. Time of treatment eighteen days.

II. Typhus, with hemorrhage of the intestines, in a woman. The patient was thirty-four years of age, with four children, menses regular; the following were the symptoms: general sinking, bitter taste in the mouth, shuddering, with occasional heat, violent and oppressive head-ache over the forehead, and in

the occiput; burning pains in the abdomen and loins; belly tumid, pains, burning to the touch above the navel. Constipation, tongue thickened, covered with a dirty-yellow coat, the skin dry and hot; sleep, but little at a time, restless, troubled with frightful dreams, no appetite.

Gave *Bry.* ii. gtt. j., four times a day, during four days, followed by violent exacerbation, with intolerable pain in the loins, belly harder, more swollen, and more painful. *Nux vom.* ii. gtt. j. every two hours. The next night, evacuation of two pints of black blood, partly clotted, partly liquid, by the anus, followed by fainting, but some hours after, appetite and sleep. The next day, same evacuation, but less in quantity, succeeded by diminution of all the symptoms. *Nux vom.* iv. gtt. j. four times a day. During the two succeeding days, three similar evacuations, but less, and mixt with feces. Sleep, then regular stools. During the following week, *Nux vom.* every day, followed by complete cure.*

III.—*Catarrh of the bladder.* (SCHROEN.)—Man, sixty years old, well in other respects. Every hour ineffectual desire to urinate, with violent griping pains in the region of the bladder, and burning in the urethra, emission of urine by drops, followed by continual desire. Viscous, turbid urine, of which one-third was viscous sediment. Can., Canth., Merc., Stra., Lycop., Petrol, were given in vain. *Sulphur* put an end to the malady in a short time, excepting a little viscous sediment in the urine.

IV. Woman aged sixty years; constant, pain-

* The treatment, with whatsoever success it may have been crowned, is, in regard to the doses, entirely Allopathic; much smaller doses would have brought about the cure in a much milder manner. Without the evacuation of so enormous a quantity of blood, the woman would, doubtless, have sunk, and we cannot understand how, in the fear of the first exacerbation after the administration of *Bryon.*, he could give *Nux* in the same dose.—(Molin.)

ful desire to urinate, with painful emission of a few drops; followed by a dragging sensation along the line of the urethra; desire to urinate thirty or forty times during twenty-four hours; muddy urine, with white, viscous sediment. *Sulphur* effected a cure in a fortnight.

V. *The same catarrh, but acute*, in three young women. Gripping pains in the umbilical region, extending towards the ovaria; desire to urinate, with scanty discharge of viscous urine; afterwards, pains like labor-pains along the line of the ureters, extending down to the thighs; burning in the urethra; urine every hour; continued pain in the hypogastrium; frequent stools, with griping pains and tenesmus; fever in the evening. *Colocynth* promptly cured it.

VI. *Same catarrh, a case in Paris.*—Young woman, thirty-two years of age, alive to the slightest impressions, subject to nervous affections, leucorrhœa. Desire to urinate three or four times an hour, discharge of urine, sometimes by drops, sometimes abundantly, always with violent burning in the urethra, urine deep red, muddy, viscous, with copious sediment of grayish color, griping pains, also resembling labor-pains, sensation as if the uterus were overturned. Before urinating, uneasiness, hot sweat, startings; succeeded by attacks of convulsions, cold sweat, then shuddering, alternating with heat, insomnia in consequence of the pains. She had been treated Allopathically by a tisane of flaxseed for eight days, but the disease continued to increase. *Colocynth* 30, in a dozen spoonfuls of water, cured her in three days. Eight days after, the burning in the urethra returned, in consequence of her having eaten strong cheese. A spoonful of the medicine was sufficient to remove the trouble.

VII. *Urticaria, nettle-rash*, from the use of balsam Copaiba.

Dr. Lehman, at Torgan, having been called to a young officer who had had almost every

disease, from childhood upwards, found him in the following condition: Face pale, the flesh rather flabby, and the whole body covered with a miliary eruption, which had shown itself first on the face, particularly on the forehead, then on the back of the hands, and finally on the other parts of the body. This eruption had reached its height in eight days, without being accompanied by any other symptoms than a painful burning of the skin, some slight pains in the throat, (without any swelling either of the tonsils or of the palate,) a sensation as if a violent sweat were about to break out, a sweat which, according to the account of the patient, had shown itself as soon as he lay down in bed. No fever, thirst, or the least derangement of the appetite. This exanthema consisted of separate spots, clearly defined, a little elevated, of bright red color, like the sting of an insect. The spots were contingent and confluent only at the ears, and on the back of the hands. At the end of six days the redness of the eruption had entirely disappeared; but the skin on these spots was of a yellowish brown color, like hepatic spots. Desquamation took place only at the ears, the epidermis of which gradually peeled off in little scales, like bran. At the expiration of four weeks, the brownish spots were still distinctly visible on the skin, especially when the patient was exposed to the cold, or on compressing the veins of the arms, as before bleeding. As long as he remained in bed or in a warm room, no trace of the exanthema was to be seen.

Dr. Lehman considered it as a mild form of *Urticaria*.

It was only after the entire disappearance of the eruption, that the patient confessed that he had had Gonorrhœa. He had taken at first Cubebs and afterwards balsam of Copaiba, to the extent of 150 drops a day. Five days after the first dose of this medicine, the Gonorrhœa had disappeared, but in two days

after, having taken no more Copaiba, he discovered the exanthema. The latter had scarcely ceased, when the Gonorrhœa re-appeared. There is no doubt that this eruption was similar to those observed by Romhild, Gross, Heim, Levenstein, Eck, and others, after the use of the balsam Copaiba.

DENTAL CASE,

BY B. C. DUTCHER, M. D.

No. II.

September 28, Mrs. B. called to consult me respecting her teeth. She informed me that they had all been filled some eighteen months or two years previously, (by a gentleman whose name I will not mention here,) but that the fillings had mostly all fallen out soon after they were put in. Some two or three of the fillings I found remaining, but either from the cavities not having been properly cleaned out, or the fillings having been badly put in, so as to permit moisture to pass behind them into the cavities, the process of decay had apparently progressed as rapidly in these teeth as in those in which the fillings had not remained. This condition I anticipated from the dark appearance of the teeth for some distance around the fillings, which I removed, and found a mass of decay exceedingly offensive underneath them. I carefully cleaned the cavities of all her teeth that could be saved by filling, and filled them firmly with gold, and others that were too far decayed to save I extracted.

About three days after the operation her husband called and informed me that his lady had suffered severe piercing and twinging pains in several of her teeth, for much of the time since I had filled them.

Upon investigation I ascertained that the pains affected only those teeth which were de-

cayed nearly through to the nerves, before I filled them, so that the fillings approached near to the nerves, there being but a very thin stratum of the softer portion of the teeth between the fillings and the nerves.

I also ascertained that the pains were produced by taking warm food or drinks (such as coffee or tea) into the mouth, and that they would continue for some length of time, and then gradually subside until she became entirely relieved, when, upon taking the smallest quantity of any thing warm into the mouth, again there would be a recurrence of the most severe and excruciating pain. From these facts, gold being a ready conductor, and the teeth non-conductors of caloric, or the principle of heat, I supposed that the heat of the food or drinks was rapidly conveyed through the gold fillings to the nerves, and produced a violent shock upon them, which gave rise to all the difficulty.

According to the indications of the case I selected, Sulph. 24, and Sil. 6, the former to be taken at four o'clock, P. M., and the latter at ten in the evening. That night she rested quietly, and the next day she could freely take her food and drinks without the least inconvenience, and has continued to do so up to the present period.

In this case some of those teeth which I extracted might have been saved had they been properly done in the first instance, and probably the patient spared the severe sufferings consequent upon filling those so far decayed which might have been filled eighteen months previously without any inconvenience.

DR. CHAPMAN ON CALOMEL.

The following paragraph on the evil effects of the free use of Calomel, has been exten-

sively circulated through the newspapers ; and as it remains uncontradicted, we presume it to be genuine. But whether the learned Professor really uttered it or not, its truth renders the question of its authenticity, which we have little doubt will be raised by zealous young Allopathists, very unimportant indeed.

"Gentlemen : If you could see what I almost daily see in my private practice in this city, persons from the South in the very last stages of wretched existence, emaciated to a skeleton, with both tables of the skull almost completely perforated in many places, the nose half gone, with rotten jaws, ulcerated throats, breaths more pestiferous, more intolerable than poisonous upas, limbs racked with the pains of the Inquisition, minds as imbecile as the puling babe, a grievous burden to themselves and a disgusting spectacle to others, you would exclaim, as I have often done, 'O ! the lamentable want of science, that dictates the abuse of that noxious drug, calomel, in the Southern States !' Gentlemen, it is a disgraceful reproach to the profession of medicine, it is quackery, horrid, unwarranted, murderous quackery.—What merit do gentlemen of the South flatter themselves they possess, by being able to salivate a patient ? Cannot the veriest fool in Christendom salivate—give calomel ? But I will ask another question. *Who is it that can stop the career of mercury, at will, after it has taken the reins in its own destructive and ungovernable hands ?* He who, for an ordinary cause resigns the fate of his patient to mercury, is a vile enemy to the sick ; and if he is tolerably popular, will, in one successful season, have paved the way for the business of life ; for he has enough to do ever afterward to stop the mercurial breach of the constitutions of his dilapidated patients. He has thrown himself in fearful proximity to death, and has now to fight him at arm's length as long as the patient maintains a miserable existence."

 REVIEW.

"HANDBUCH DER HOMŒOPATHISCHEN HEILMITTELLEHRE; NACH DEM GESAMMTEN ÄLTEREN UND BIS AUF DIE NEUESTE ZEIT HERAB GENAU REDIVIRTEN QUELLEN DER PHARMAKODYNAMIK UND THERAPIE, DEM GEGENWÄRTIGEN STANDPUNKTE DER HOMŒOPATHIE GEMAESS BEARBEITET VON DR. ALPHONS NOACK, IN LEIPZIG, UND MED.—RATH DR. CARL FRIEDR. TRINKS, IN DRESDEN. LEIPZIG, VERLAG VON LUDWIG SCHUMANN, 1842."

"*Manual of the Homœopathic Materia Medica; carefully collated from the universal sources, ancient and modern, of Pharmacodynamics and Therapeutics, according to the present condition of the Homœopathic method, by Alphonso Noack, M. D., of Leipsic, and Charles F. Trinks, M. D., and Medical Councillor, of Dresden.*

The appearance of this work is an indisputable trophy of the present victorious position of the new school. No mere Allopathist, whatever may be his industry or endowments, can participate in its labors, nor share in the lasting honors which it foreshadows. Homœopathia only can consummate the high scientific union between the pharmacodynamics and therapia.

Hahnemann originated the epuration of the two great elements of this union, and his disciples must complete it for posterity. The operation of drugs upon the healthy constitution, including the morbid alterations of structure which they produce, belongs exclusively to our school. Physicians of the ordinary

schools of every kind may make occasional observations as to the pure powers of drugs, and morbid anatomists may, by praiseworthy perseverance, develop corresponding chapters of facts in their line of research; but the labors of both are an isolated, amorphous heap of building materials merely, having none of the cohesion or force or beauty which belongs to an edifice erected on the principles of true art.

The work before us presents the ground-plan of that greatest of human edifices, a rational Study of Medicine, such as future ages must continue to realize and perfect, and such as only Homœopathists could project. It is a systematic arrangement of drugs on the healthy and in disease, an attempt entirely new in plan and detail. The student is presented, 1. with the pure pharmacodynamics of an article of the *Materia Medica*; 2. the pathological anatomy; 3. the clinics according to the ordinary school, including indifferently, all the various and contradictory sects of Allopathy, and treating all with calm fairness; 4. the clinical indications of the new school, consisting, of course, in a cursory *résumé* of the pharmacodynamics (a process of which Allopathy cannot make use, and of which Allopathists are necessarily incapable); 5. the antidotes, chemical and dynamic, are given; 6. and 7. the natural allies of the drug are given; 8. and 9. the duration of its operations and its posology complete the essay.

Trinks, the senior editor, has been identified with our school at least twenty years, and as early as 1827, in conjunction with the learned Hartlaub, earned the gratitude of the profession by a "systematic arrangement" of the pure *Materia Medica*, a voluminous and most laborious work. Hartlaub and Trinks also published in 1830—4, four volumes of *Annals of Homœopathic Clinics*. These and other faithful and modest enterprises have given Trinks high qualifications for the still

greater and more important task he has now undertaken.

Of Dr. Noack we have had opportunity to know but little, except that he is a highly respectable practitioner of medicine, and has for some years been at the head of the Homœopathic Infirmary at Leipzig. We cannot repress a fear that the Manual may linger too long in the press, and even that from its magnitude (it cannot stop short of 3000 pages royal octavo) it may fail of perfect completion. We trust fervently, however, in the indomitable character of Trinks.

The editors ask, doubtless with great propriety, for a suspension of all criticism till the work is complete, when the introductory essay, containing a key to its use, will be delivered; but we beg leave to express our surprise at their suppressing the doses of the ultra-Hahnemannian branch of the school. The editors are known to belong to the opposite pole of the school, but this appears to us a departure from the general impartiality which characterizes their work in other respects.

We deem it due alike to Hahnemann and to enquirers into the method, that a work purporting to present a posology for the entire school, should state the whole truth. Although in our own practice we prefer the lower dilutions, and in our theoretic view, on this subject, we reject the idea of dynamization, yet were we to attempt to give a view of the present state of the question, a regard for truth would necessarily compel us to say that the doses range from 30, to the undiluted form of most of the remedies. When even a Schœnlein strongly recommends the exhibition of several remedies by the process of smelling as most efficient, and that too, in some severe diseases, shall Trinks and Noack, from any considerations for themselves, or for the progress of the new art, recede in the face of the most abundant testimony, and of the copious analogies which the etiology of miasmatic diseases casts

before us on every leaf of pathology, and surrender not only all that has been, or may be, gained for the millions who are still subjected to the desperate chance doses of the old schools?

There are unquestionably many cases occurring in every physician's practice, in which the choice ought to fall on higher dilutions than are stated in this manual; and we have for many years ceased to doubt, that there is at least an equal number of cases in which lower dilutions than those so strongly insisted upon by Hahnemann can be used with perfect safety and prompt benefit.

But the difference should be frankly stated by all who affect to give a posological table, so that students and new practitioners may have a fair and full field of enquiry and observation.

With this exception, we commend the work to the possession and careful study of all American Homœopathsists—aye, and to the cavils of our opponents every where. It should not be expected by the new members that this work will take the place of Jahr's Manual. This will not occur; Jahr will remain an indispensable companion and guide in the selection of remedies. His work has qualifications for this important purpose, which the reading of the later manual will only illustrate and enhance. This work must be regarded as in some respects a substitute for the *Materia Medica* of Hahnemann, and as therefore following, in the process of selecting a remedy, the first steps which have been effected by aid of Jahr's manual.

In the end however the choice must be determined in all difficult cases by a faithful study of the remedies most indicated by both these manuals, in the original German *Materia Medica* of Hahnemann; nothing short of this laborious research can give full and entire justice in any case involving the safety of a fellow being's health and life.

No translation can possibly convey the exact image of a drug which is portrayed by the trier of it in his mother tongue, nor can any abbreviation of the symptoms, however skilfully it may be arranged in regard to the advanced and improving science of vitalization, supply the place of his unsophisticated details.

Drs. Hering and Neidhard, of Philadelphia, have issued proposals for publishing in this country an English translation of this Manual. We hope they may meet sufficient encouragement at once to proceed with this by no means trifling undertaking.

ON THE

PREVENTION OF TUBERCLES.

In a letter addressed to the Royal Academy of Medicine, M. Coster announces that, from certain experiments which he has made, he hopes to prove :—

1. That it is possible, even in the face of predisposing causes, to prevent the development of the tubercular diathesis.

2. That even where the formation of tubercles has commenced, their progress may, in a great number of cases, be arrested.

The following are a few of the experiments upon which M. Coster has built up his hopes :—

Two years ago he placed a number of dogs, rabbits, &c., in the circumstances most favorable to the development of the scrofulous diathesis. Thus many of the unfortunate animals were shut up in dungeons, without light, incapable of moving, and exposed to a moist cold, by means of wet sponges which were hung up in cages. Some of the animals

placed in these conditions were fed on their ordinary diet ; others were fed with ferruginous bread, containing half an ounce of carbonate of iron to the pound. All the former became ill, the greater part tuberculous, but not one of those fed on the bread containing iron presented a trace of tubercles.”—*Bull. de l'Acad., and Lancet, Feb. 15, 1840, p. 772.*

HOMŒOPATHIC INTELLIGENCE.

HOMŒOPATHIC HOSPITAL IN LONDON.

Mr. Leaf, an opulent merchant of London, has been zealously exerting himself for some years to establish a Hospital, and despite almost insurmountable obstacles, his efforts have been crowned with success. The Hospital contains *sixty-three beds*, and is under the charge of P. Curie, M. D. The results of treatment, which are quite brilliant, have been already published under the title “*Annals of the London Homœopathic Hospital, founded by Mr. Leaf; Physician, Dr. Curie, July, 1842.*”

The Evening Post of this city, contains the following interesting extract respecting the above institution, from a letter dated London, November 3d :

“Our Homœopathic Hospital is in full operation, and is yielding results of the most extraordinary kind. It is established at a large and handsome house, No. 17 Hanover Square, the most fashionable quarter of the metropolis, and is constantly attended by persons of rank and influence. I hope by the next packet to send you a list of the subscribers, which, although not numerous, because the hospital is chiefly supported by one wealthy and ardent disciple of the system, comprises some names that would astonish those who lay the flattering unction to their souls, that the doctrine only

numbers among its supporters weak minded enthusiasts or the ignorant tools of designing quacks."

AUSTRIA.—VIENNA.

His Imperial Highness, Archduke John of Austria (brother of the Emperor) has nominated for his Family physician, Dr. Marenzeller, Staff Surgeon, I. A., (Homœopathist.)

PRUSSIA.—BERLIN.

The King of Prussia has conferred an order of the Red Eagle of the third class, on Dr. Vehsemeyer, Physician to H. R. H. Princess Albrecht.

SAXONY.

Prince Henry of Saxony has chosen Dr. Schwartz, late Homœopathist at Dresden, his Physician in ordinary: this nomination has been confirmed by the king.

SCHÖNNINGEN.

Dr. Hermann has been appointed Physician to the city and district of Schoenningen, notwithstanding his avowed advocacy of Homœopathia, which heretofore has proved an insuperable obstacle to such an appointment in most of the German States.

The increase of Hospitals, and the frequent distinctions recently conferred on Homœopathic physicians, are singular illustrations of the veracity of those Allopathists who with repeated evidence to the contrary before their eyes, have the hardihood even now, to proclaim the decline of Homœopathia in Europe! These indulgences of the imagination may produce a temporary effect, but must ultimately recoil on their authors.

COMMUNICATIONS ON FILE.

1. *Hahnemann on Chronic Diseases, translated from the French of Jourdan, by Geddes M. Scott, M. D., Glasgow, Scotland.*

Our able correspondent of Glasgow commands our best thanks for his careful translation of one of the most important works of our school. We had intended to have published the entire translation, in consecutive numbers of the Examiner; but, as a fifth edition of the work has subsequently appeared in the German, with many additions from Hahnemann, and as this last work is in preparation for the American press, we have been reluctantly compelled to alter our course. Instead thereof, we have commenced with extracts from the present translation, with such critical remarks as might illustrate the true positions of the Homœopathic school, for which we refer the reader to the 3d number of the 3d volume.

2. *An interesting case of Poisoning by Cantharides, related by H. E. Dunnel, M. D.*
3. *Kallenbach of Berlin, on Constipation, by James M. Quin, M. D.*

HOMŒOPATHIC LITERATURE.

39. *Des moyens Homœopathiques de Guérir la Rage et de la prévenir; Par M. le Comte S. Des Guidi, Chevalier de l'ordre royal de la Légion-d'Honneur, &c., Paris, chez Balliere, Libraire, 1842.*

40. *Annales de la Médecine, Homœopathique, publiées par MM. Léon Simon, G. H. G. Jahr, and Croserio, Docteurs en Médecine. On s'abonne à Paris, au bureau du Journal, Rue Lavoisier, 22. 1842.*

We have received the first seven numbers of this very able periodical, an analysis of which we shall give in an ensuing number of the Examiner.

T H E

HOMŒOPATHIC EXAMINER.

No. 5. ⁴⁶

JANUARY—FEBRUARY, 1843.

VOL. 3.

HAHNEMANN

ON

CHRONIC DISEASES.

No. II.

In No. I we exhibited, what we consider, the starting point of the theory of Hahnemann, to wit, his division of the human miasmatic diseases into acute and chronic ; and we took from the first part of the work, the proofs he has chosen to adduce from Allopathic writers in support of his proposition, that a suppression of the itch on the skin is followed by deathly diseases of internal organs, unless by art or accident the latent miasm be extinguished, or the itch be made to reappear on the surface. He says that these are only a very small part of the proofs he might collect from the literature of the old school, and that he could furnish at least an equal number from his own practice. We entertain no doubt of this last assertion, monstrous as it may appear to those of our Allopathic readers, who have not accustomed themselves for a long time, to enquire into the origin and history of the chronic cases, which they are called on to treat ; for the records of our own practice, which have

been steadily accumulating testimony on this point since 1828, when Hahnemann's theory was made known, furnish almost as many indisputable facts as he has quoted from the old authors.

The first case we had after receiving the work on Chronic Maladies, was one of "white swelling" of the knee-joint, which had appeared within six weeks after the patient had removed an itch eruption by sulphur ointment. The case was of eleven years' standing. The knee had attained an enormous volume, and all motion had been extinguished for several years. The internal use of Sulphur triturated with Carbonate of Ammonia,* produced an eruption on the entire surface of the white swelling, closely resembling the itch in all respects. Upon the first appearance of the exanthem, the Sulphur and Ammonia powders were discontinued ; and in an incredibly short space of time all the constitutional signs of the malady disappeared, the knee began to exhibit slight mobility, and the old indurated swelling began slowly to disappear. A few months afterwards, the patient, a poor woman, living at Rockaway, came up to see me. She walked on the affected limb with the assistance of a cane, having thrown away the

* The extent of the disorganizations rendered me so despairing of the event of any treatment, that I did not attempt to treat it strictly according to Hahnemann's rules.

crutches which had supported her for so many years, entirely and forever!

No other remedy was necessary. The change in her general appearance was very striking. The artificial exanthem disappeared of itself after a few weeks' duration.*

This case furnished the two-fold proof, by analysis and synthesis, as it were, and was amply sufficient to awaken our attention to the great question started by Hahnemann, respecting the psoric origin of all non-syphilitic dyscrasies. Subsequent observation has, in a vast number of instances, the peculiarities of which we have recorded, fully corroborated the impression it made.

According to Hahnemann, the purulent matter produced by the chronic miasmatic diseases, is the vehicle, merely, of the contagion; and the contagious element affects the nerves first, and produces, invariably, a constitutional (general) disease, before the specific external inflammation takes place. He concludes thus, 1. from the lapse of time which occurs after the impure contact, before the specific local symptoms appear, which in the venereal disease is from five days to fourteen, and occasionally to three, four, or five weeks; 2. from the entire disappearance of any slight inflammation or abrasion connected with the first

act of contagion, before the specific inflammation is set up; 3. from analogies furnished by the acute miasmatic diseases, as the measles, scarlet fever, small pox, kine pox, &c., &c.; and 4. from the occurrence of a greater or less degree of irritative fever, which he has detected, prior to the establishment of the local eruption.

He considers the eruption in both cases, the psoric and syphilitic, as an effort of the mysterious instinctive power of life to relieve the internal man (so to speak) from the disturbing miasm; a kind of crisis, which, in the true chronic diseases, the vital force is not able to perfect; or a vicariation which the *vis medicatrix* establishes on an organ remote from the vital centre, in default of its ability to crush the miasm by an internal vital contest.

In support of this hypothesis he asserts as a fact, that, during the existence of the itch on the skin, the constitutional health remains comparatively very good; that, excepting the necessary consequences of the intolerable itching, as watching and some debility, the health of the important organs is good, as of the stomach, lungs, kidneys, &c.; and that the signs of the internal existence of a serious malady are absent. So also of the venereal malady, he affirms that so long as the primary vicar of the internal hydra, the chancre, is permitted to remain undisturbed, no sign of the internal lues venerea will transpire, even though this state of things be allowed for years, as observed by John Hunter and by himself.*

Hahnemann affirms that in the chronic, as in the acute miasmatic diseases, in syphilis and itch, as in scarlet fever and small pox, the system is first thoroughly impregnated before the

* It is well, perhaps, to mention, as illustrating the difficulty of getting at the fact of psoric origin, that this woman had wholly forgotten that she had ever had the itch, and accordingly said that she had had no disease, whatever, prior to the appearance of the struma. But her mother, who accompanied her, corrected her memory on this point. I arrived at the precise lapse of time from the suppression of the itch to its reappearance in the secondary form, the "white swelling," by a comparison of dates furnished by the mother and daughter, piecemeal from each. The itch had been cured during the Christmas holidays in 1817, and the white swelling began to attract their attention about the 1st of February, 1818, ensuing.

* With reference to syphilis, we are able to say with certainty, that during twenty years observation, we have not yet seen a single instance of constitutional lues being manifested during the existence of the primary chancre.

cutaneous inflammation appears. To support this important restoration of an ancient point of faith in the profession, he relies much on the results of his own observations, and on the analogies furnished by the acute miasmatic maladies, and especially on those furnished by hydrophobia, which he calls a half acute miasm.

* * * * *

"In the development of these three chronic evils there are three epochs, as in the acute miasmatic exanthemata, to be considered, with far greater attention than has heretofore been bestowed upon them. I mean, **FIRST**, the act of contagion, [Zeitpunct der Ansteckung]; **SECOND**, the space of time in which the whole system is operated upon by the contagious disease, until it has established itself in the vital processes [bis sie sich im Innern ausgebildet hat]; and, **THIRD**, the appearance of the eruption, whereby nature announces, as it were, the full and complete construction of the miasmatic evil in the interior of the entire organization.

"The poisoning with the miasms of the acute as well as the three named chronic diseases, occurs, beyond a question, instantaneously, that is to say, it is the work of a single moment, which happens to be favorable to such process.

"If the small pox or the cow pox take [by inoculation] at all, it affects at the instant of bringing the lymph in contact with the exposed nerves of the part wounded for the purpose. From the moment of contact the lymph has imparted its morbid impressions irrevocably to the vital forces, that is to say, through the medium of a few nervous filaments to the whole nervous system, at one and the same instant. After this momentary contact no washing or cauterizing, nay, not even the excision of the inoculated parts, will arrest or annihilate the internal malady. The variola, the

vaccine, the measles, etc., will nevertheless proceed internally till ready to produce their peculiar fever, after a sufficient time has elapsed (several days) for the internal malady to develop itself fully.*

"Not to multiply the acute instances needlessly, we may cite the analogous operation of the gangrene [carbuncle?] in the ox, which, in spite of all precautions taken by immediate washing, &c., is often communicated to man by smearing the blood of the affected animal on the skin. The dangerous gangrene vesicle usually shows itself on the spots covered with the blood, after four or five days have elapsed, i. e. as soon as the whole living organism has been transformed to this terrible malady."

* "It can be asked with propriety, if there be any miasm in the world, which, after the act of contagion, does not first affect the whole organism before exhibiting itself upon the surface? We must answer, no; there is not one!

"Do not three, four, five days elapse after vaccination, before the wounded point shows signs of inflammation? Is there not first a kind of fever paroxysm, a sign of a general morbid state, before the kine pock pustule is fairly developed on the 7th or 8th day?

"Do not some ten or twelve days elapse after the reception of the variolous miasm, before the appearance of the inflammatory fever and the pustules?

"And what has nature been doing with the contagion during these ten or twelve days? Does she not domesticate the disease in the whole organism before she is able to light up the irritative fever and bring out the exanthem on the skin?

"The measles require some ten or twelve days after the act of contagion, or after inoculation, before the eruption, with its fever, appears. After exposure to scarlet fever, there usually pass some seven days before the fever and eruption show themselves.

"What has nature been doing, in the mean time, with the miasm in her possession? What else than to incorporate the miasm, whether measles or scarlatina, into the whole living constitution, as a necessary preliminary operation to her bringing out the exanthem and fever upon the surface?"

"Thus, also, is it with the contagion of the half-acute miasms, those which have no eruptions. (Among many bitten by rabid dogs—thanks to the benevolent Governor of the universe—but few are contaminated, seldom one in twelve; often, as I myself have seen, not one in twenty or even thirty; the others, however severely wounded, always recover, provided they are neither medically nor surgically treated.*)"

"Whoever receives the poison of hydrophobia, is affected by it at the moment of the bite. The poison communicates itself instantly from the nerves of the wounded part to the whole nervous system, and the madness breaks out as soon as the malady is fully developed in the living organism [sobald das Uebel im ganzen Organismus ausgebildet ist] as an acute and rapidly fatal disease. (Nature requires at shortest, several days, and generally several weeks, to construct the internal malady perfectly.) As I have said, if the slaver of the rabid animal have communicated the contagion to the system of the sufferer, then it is irrevocable from the first instant of the bite; for experiences show that speedy excision or amputation of the parts covered with the slaver, do not arrest the growth of the disease in the interior of the organism, do not prevent the irruption of the hydrophobia. And therefore are the popular means of protection, the topical purifiers, as burning and suppurating means, so wholly fruitless.†

* "We are peculiarly indebted for these consoling facts to certain careful English and American observers; to Hunter and Houlston, (London Journal, vol. v.) and to Vaughn, Shadwell and Percival, whose observations are cited in James Mease's essay 'On Hydrophobia,' Philad. 1793."

† "A girl of 8 years of age was bitten by a mad dog, in Glasgow, on the 21st March, 1792. The wounded part was cut entirely away by a surgeon on the spot, the surgical wound was kept suppurating, and the patient kept in a mild pyalism of mercury.

"From what has been said it may be plainly seen that, after the act of contagion from without, its correlative malady must first be established within the whole man—the inner man must first be completely transformed into a measles, or variolous, or scarlatina man, before the eruption can make its appearance on the skin.

"For all these acute miasmatic diseases, the vital forces of the human system generally possess the ability to set up the mysterious, but beneficent process of separating them from the organism [crisis] by means of specific fevers and specific eruptions, in the course of two or three weeks;* so that, if the patient do not succumb to the disease, he is perfectly free from the miasm, internally and externally in a very short time.

"Nature pursues the same course with the chronic miasmatic diseases, in respect to their mode of contagion and to the construction of internal maladies before the pathognostic sign of the completion of the inner process, the

Nevertheless the patient was seized with hydrophobia on the 27th and died on the 29th of April.—Vide Duncan's Med. Commentaries, vol. vii. and the New London Med. Journal II, 1793."

* "Or we may represent the case thus: these acute semi-spiritual miasms affect the entire vital power, at the moment of contagion, and then grow up parasitically in the vital processes, and modify them, each in its own mode, producing lastly their peculiar fruit, (the ripe cutaneous eruption, capable of propagating its like) and then dying away spontaneously, leaving the system to simple convalescence.

"But the chronic miasms, after having, in like manner, attached themselves, as parasites, to the vital processes, living from and with the vitality of their victims, grown up to their perfect stature, and evolved their specific fruit, possessing the power of reproduction (the itch pustule, the chancre, the sycotic wart), unlike the acute, will not perish spontaneously; they require the application of a very similar medicinal-disease agent, an artificial counter-contagion, to annihilate them from the constitution."

eruption on the surface of the body, takes place. But here the great analogy ends. The chronic miasms constantly remain, as has been already remarked, during the life time of their subjects, increasing with the advance of years, unless they are extinguished, radically cured, by art.

"For our present purpose [opposing the local theory] we adduce the two miasms with which we are best acquainted, namely: the **VENEREAL CHANCER, AND THE ITCH.**

"During the first few days after the impure contact, the point of inoculation on the genitalia exhibits nothing morbid, no inflammation, no erosion; all attempts to wash away the contagion, however, immediately after the impure connection, all purifyings, are wholly fruitless. The spot remains to all appearance quite sound and healthy; it is the interior of the constitution only which is set into morbid activity (and that commonly at once) by the contagious miasm, which the system thoroughly incorporates with itself and becomes venereally sick.

"First, then, when this penetration of all the organs on the part of the adopted evil has taken place; first then, when the **WHOLE** is changed to a thoroughly venereal man, i. e. when the construction of the inner venereal malady is perfected, does the morbid vitality attempt to quell the inner evil, by producing the local symptom which, at first a small vesicle, usually on the spot inoculated, and afterwards a painful ulcer, is called **CHANCER.**

"But this chancre does not appear till after 5, 7 and 14 days, and sometimes not till 3, 4 and 5 weeks have elapsed from the moment of contagion; and therefore it must be regarded as a vicarious ulcer for the internal disease, which has thoroughly impressed the whole organism, and one which [as a product and expression of the internal specific disease] should be capable of reproducing the disease in other persons.

"If now, the entire disease thus produced be again dissolved by the specific means internally administered, the chancre heals of itself, (without local treatment) because the constitution is disenthralled of the internal miasm.

"If however, before the extinction of the internal malady the chancre be extinguished by topical means, as is still the daily practice of physicians of the old school [1828—and is yet in 1843!] then of course the miasmatic-chronic venereal malady remains in the organism, and continues to grow worse, to the end of life, unless internally healed (by the Homœopathic means;) even the most rugged bodily constitutions are unable to overcome it.*

"The only way to heal a chancre properly, is, as I have for many years taught and practised, to apply no local remedies, but to heal the venereal malady within, which pervades the whole system. The merely local treatment (in default of all constitutional treatment, by which the system is protected from the assaults of the inner malady,) is sure to be followed by syphilis, and its attendant sufferings."

"**PSORA** (the itch-malady) like the **VENEREAL DISEASE**, is a true chronic miasmatic disease, and has a similar constitution [Bildung.] But the itch-malady is by far the

* "And this is equally the case, if the chancre be quickly removed, without escharotics or other cauterizing means (from which, poor expounders say that the virus is driven in upon the sound interior of the body); for even after the quicker and unirritating removal of the chancre, the lues secundaria just as certainly appears; a fact which abundantly proves the pre-existence of the syphilis in the constitution. *Petit*, cut away a portion of one of the labia minora on which a chancre had appeared a few days before; the wound healed indeed, but the lues nevertheless broke out.—Vide *Fabre, Lettres, Supplément à son traité des maladies Vénériennes, Paris, 1786.* Of course! since the venereal disease was present in the whole organism before the chancre broke out."

most contagious of the chronic miasms (the venereal chancre disease and the sycosis disease.) For the communication of the two latter, some degree of attrition, in parts largely supplied with nerves, and but thinly covered by integuments (a kind of wound) is necessary : but the psoric miasm requires merely a slight touch anywhere on the skin, especially in young children.

"Nearly every human being is susceptible to this miasm, and that too under nearly every possible circumstance, which is by no means the case with the other two."

[Remarks on No. I, communicated in a Letter from a Medical Friend to Dr. Gray.]

Your remarks upon chronic diseases in the last No. of the Examiner, induce me to submit the following to your consideration. Your strictures upon Schönlein and Jahn are just, and permit me to add that Autenrieth and Eisenmann should have been included in them.* It would be difficult to mention four names which have acquired greater celebrity in Germany than those just mentioned ; yet they, as you have correctly remarked, do not hesitate to teach in their lectures and writings the identical doctrines of Hahnemann, although neither of them has as yet given the least credit to him. Jahn states that the doctrine of internal exanthems, or enanthems, opens to physicians quite a new world, which must soon prove as interesting to them, as America and Australia were to natural historians, on their first discovery. He further states in his "*Bei trage zur Naturgeschichte der Schönlein'schen Binne-*

* Autenrieth has become as celebrated for his researches upon internal psoric diseases, as Schönlein has for his on internal eruptive diseases in general ; yet Autenrieth first promulgated his views in 1836, while Hahnemann had advanced his as early as 1828.

nausschlage oder entexantheme," that the ancient Grecian physicians recognized the existence of an internal erysipelas, an internal itch eruption, an internal plague-exanthem, and an internal leprous eruption ; but adds that the knowledge of internal eruptions remained stationary, or rather retrograded from the point, to which it had been traced by the searching gaze of the old sages, until Schönlein [Hahnemann] drew fresh attention to the long neglected subject. Schönlein has, however, given much more scientific and systematic shape to his researches, than has Hahnemann, but we deny the right to call the exanthems, the "internal eruptions of Schönlein." From the remarks upon the various internal eruptions, we select those upon internal psoric diseases, and translate them from the work of Jahn, that we have above alluded to.

"We learn, that after the existence of internal chronic eruptions had been insisted upon by J. P. FRANK, in his *Prax. Med. Univ.* the reality of internal psoric eruptions was enthusiastically advanced and defended by Autenreith, who says that "the commencement of secondary chronic diseases is characterized by the development of pustules in internal organs, which pustules may be recognized by the eye, provided the patient die early enough, of this, or some other disease. If they be of a lymphatic and grayish appearance, and are seated upon the peritoneum, they are apt to cause dropsy. If they select the intestines and develop themselves in groups upon the mucous surface, ulcers ensue and cause incurable diarrhœa. When seated in the chest, they not unfrequently excite psoric-phthisis ; the lumps which are expected, are the product of the breaking down of psoric pustules seated in the trachea. These pustules may be found at times in great numbers in the lungs, and are easily to be distinguished from tubercles. At times the choroidea is attacked by these pustules, and a

species of glaucoma ensues, and if we look into the eye in all directions, we may be able to distinguish a pustule, as through a magnifying glass. Such pustules may develop themselves upon the nerves of the extremities, and give rise to epilepsy. The psoric ulcers, which nature excites in order to cure the internal psoric diseases, generally commence with several pustules, which finally inflame; they have this characteristic sign, that fresh psoric pustules continually develop themselves about their circumference. Nature may also cure such internal diseases, by re-developing primitive psora upon the skin.

"Jahn adds, that in this representation, the presence of psoric eruptions upon the peritoneum, the intestinal mucous membrane, the tracheal and pulmonary mucous membrane, upon the choroidea, and the nervous sheaths, is conjectured. This great physician has also detected them upon the surface of the liver, spleen, mesentery, pericardium, external surface of intestines, on the membranes of the brain, and in the joints, and, in fact, in the shape of small, white, barley-seed-like pustules: he strengthens his position by appealing to the distinguished morbid anatomist, BAILLIE, who found pea-sized pustules in the lungs, after repelled itch; and to MORGAGNI. Autenreith mentions that he possesses a choroidea, taken from a subject laboring under repelled itch, which is covered with white, hard, pustules, of the size of a common pin's head. He also states that a watery, at times frothy, colorless expectoration, in which are found only single and small lumps of thick, yellow pus, which does not dissolve in the watery fluid, may be looked upon as characteristic of psoric phthisis.

"P. J. Frank, to whom we have before alluded, says in part 4, p. 13, of his work; 'That there are internal chronic eruptions, is evident from the tedious chronic inflammations which arise when skin-eruptions are badly treated or

repelled, and from the morbid alterations which we find after death, viz. spots, vesicles, pustules, and superficial ulcers, effusing purulent or ichorous fluids, especially in the trachea, the nose, intestines, and urethra; this view is further corroborated from the effects which we observe to arise from the repelling of chronic eruptions from the skin, and which effects only cease, after the restoration of these symptoms upon the skin.'

"PUCHELT (see System, vol. 3, p. 150): The serous and mucous membranes are especially exposed to itch-metastasis; and in post mortem examinations, vesicles which resemble the itch vesicles have been found upon these membranes.

"HIPPOCRATES recognized a psoric and leprous affection of the urinary bladder: he says: 'Theophrasti filio Larissae vesica foeda scabie, lepram dicunt, laboravit.' And in another passage: 'Quibus cum urina crassa furfuri similia quaedam simul exeunt, iis vesica psora laborat.' ALIBERT, in his work on skin diseases, regards the affection of the bladder alluded to by Hippocrates, either as a porriginous or herpetic disease, and says that the urine quickly putrifies in children, when porrigo is suddenly repressed; while, he adds; 'under such circumstances the observation made by Hippocrates is correct; for we find branny like fragments in the urine, which are of an albuminous nature, and quite similar to the flakes which fall off from the scalp in porrigo: Apparere in urina velut furfures.'

"JAHN also states that the existence of angina psorica, and of ophthalmia psorica, are undoubted, and evidently arise from a psoric exanthem seated upon a mucous, or muco-serous membrane.

"BUDDENS found pustules on the pericardium, and on the surface of the heart, in a child who died from repelled itch.

"BERGMAN found papulous excrescences in the brain or on its membranes, which, ac-

according to him, are very frequently connected with maltreated itch.

"According to Jahn, Napoleon died from maltreated itch ; for an evident papulous eruption was found upon his peritoneum.

"Jahn further states, that he himself has found vesicular, pustular, and granular formations upon the pleura and peritoneum, and in the intestines of persons suffering from repelled itch, and in whom he had diagnosed *phthisis scabiosa* during life : he says these formations were widely different from tuberculous or miliary granulations.

"The great pathologist STARK admits the presence of psoric pustules on the pleura, pericardium, and in the lungs.

"The equally great HARTMANN [not the Homœopathist] says, in his *Theorie der Krankheit*, p. 150 : 'In inveterate itch, the peculiar diseased metamorphosis does not confine itself to the skin merely, but attacks, although in a less degree, the internal membranes, especially the mucous. But now, if from any cause, it be prevented from secreting upon the skin, in common parlance, if it be dried up, or repelled, then an opposite relation takes place ; for the previously scarcely perceptible affection of the internal organs rapidly increases to such an extent, that vesicles, pustules, ulcerations, and purulent or other secretions are formed.'

"*Ophthalmia psorica* is characterized by swelling of the edges of the lids, which become the seat of burning pains. Upon a reddened face, vesicles arise, which are filled with a thin ichorous lymph ; they break and change to small ulcers, the pus secreted from which forms crusts. This process projects itself upon the blepharo and ophthalmal conjunctiva, as also upon the sacks in which the hairs of eye lashes are seated. Itch pustules have been found upon the conjunctiva of the eyelids. Beer, Walther, and Benedict, attribute this affection to an immediate deposi-

tion of itch-pus upon the eyelids. Beck attributes the disease to a simple projection of the disease from the skin to the eyes.

"Hedwig and Rudolphi have seen itch affections of the intestines in dogs affected with Psora.

"Jahn regards Prurigo as a decidedly psoric affection."

Thus far we have translated from Jahn. While reading Bichat's *Pathological Anatomy* some time since, our attention was fixed by the following passage, see page 42.

"Seros membranes are also subject to other essential affections, and which belong exclusively to them. There is first a miliary eruption, resembling itch, which writers have not considered in a general manner. Morgagni speaks of a peritoneum covered with these pustules ; but he considered them to be symptomatic of other diseases. We often meet with them in the dissecting-rooms ; they are observed on all serous membranes, but particularly upon the peritoneum. The whole surface of this membrane is then very red ; and from it arise small tubercles extremely variable in size and figure. They are found full of a steatomatous substance, and they are almost always accompanied with dropsy. Some have taken them for results of chronic enteritis ; perhaps it is only a variety of inflammation. Besides, a sufficient number of comparisons, as yet, have not been made between the observed symptoms and post-mortem appearances.

"A negro affected with a considerable looseness, caused it to cease by a repellant glisten. From that time, there occurred tenesmus, dropsy of the peritoneum, tension of the intestines, and violent pains in the abdomen—the dropsy did not diminish, and the patient grew weak rapidly. At the post-mortem examination, the intestines were found healthy, but the peritoneum was found covered with miliary eruptions full of serosity, mixed with whitish

flakes. We are ignorant of the nature of these eruptions, and their cause. Some physicians have said that *itch* and small pox can be thus re-percussed."

On page 48, Bichat says: "The pleura, as well as other serous surfaces, may also be the seat of miliary eruptions, of which we have already spoken; they end ordinarily by a serous effusion, which is more or less turbid.

On page 70, he says we sometimes see small ulcers appear in the nasal passages, caused by the revulsion of an herpetic affection.

On page 122—that the cure of an inveterate ulcer, the re-percussion of certain cutaneous diseases, as ringworm, itch, &c., may cause phthisis.

On page 166—that the re-percussion of itch may also produce fatal effects in the interior.

HUFELAND, in his *Enchiridion Medicum*, American edition, p. 418, says, many difficulties and considerations present themselves in the treatment of Itch. We may, for instance, by a merely local application, suppress the morbid cutaneous action; but the contagion which has already penetrated deeper is not destroyed, and in consequence itch reappears, or what is still worse, is translated to internal organs, and causes dangerous and obstinate diseases. Thus it can generate consumption, dropsy, spasm of the stomach, epilepsy and various kinds of nervous diseases.

SCHÖNLEIN says of Scabies Papulosa, (see *Allgemeine und speciale Pathologie und Therapie*, vol. 3, p. 39,) if it be repelled, Asthma may set in, viz., asthma psoricum, or true apoplexia nervosa, or dropsy, rarely anasarca, generally abdominal dropsy, or chronic hydrocephalus. These secondary diseases are always difficult to cure, as the attempt to restore the eruption to the skin, rarely succeeds.

Of crusta serpiginosa, the psoric character of which was first demonstrated by Autenrieth, Schönlein remarks, (see page 40,) if it be re-

pelled, secondary diseases arise, which almost always affect the nervous system, such as hydrocephalus acutus, eclampsia, psoric epilepsy, &c.

Of scabies vesicularis, Schönlein remarks, (see page 42,) if it be repelled, either itch-vertigo, itch-rheumatism, itch-amaurosis, itch-paralysis, itch neuralgia, either in the limbs or abdomen, itch-epilepsy, chlorosis psorica, mania, inflammations of the joints, especially of the knee and hip joints, or phthisis pulmonalis scabiosa, or phthisis ventriculi scab. &c., will develop itself.

Schönlein admits, and describes an asthma psoricum: the epilepsia thoracica, which is always nocturnal, he, together with Autenrieth, attributes almost exclusively to maltreated psora; the former also admits that epilepsia peripherica and even abdominalis may arise from repelled itch. Schönlein admits and describes a rheumatismus psoricus; and a form of tubercular disease which he terms impetiginous tuberculosis.

Every admirer of ARMSTRONG must remember the simple but deep earnestness of his advice upon the subject before us. He says, on page 444 of his *Essay on Fevers*, "we find that many diseases of the skin are incompatible with those of the lungs—hence it is, even in Great Britain that those persons afflicted with cutaneous diseases are the least obnoxious to pulmonary consumption; but let their cutaneous diseases be incautiously cured, and they often afterwards fall victims to supuration in the lungs, as I well know from personal observation. Besides, in some instances I have seen coughs of a phthisical tendency disappear on the coming out of a spontaneous eruption on the skin; and I have occasionally seen a similar effect from pimples artificially induced on the surface by an irritating unguent. Phthisis, too, is apt to supervene those fevers which are attended with affections of the skin." He repeats these remarks on page 494; while

on page 497 he informs us, that "sometime ago a poor woman applied to him for advice, who seemed to be hurrying towards the grave, from the force of a recent, but rapid consumption. She happened to be attacked by an eruption resembling the common itch, and the alleviation which it gave the chest was so striking, that he resolved to let it spread upon the skin. The phthisical symptoms wholly disappeared under its progress, and it was, after some weeks duration cured by sulphur. In the case of another female, who was nearly in the same state, the cough and fever gradually abated on the coming out and continuance of a spontaneous rash, and she recovered apparently from its influence alone. One patient was always relieved of a constitutional sort of cough, when pimples came freely out upon the face; but they disappeared entirely under the use of a lotion, and she shortly afterwards fell a victim to true consumption of the lungs. Armstrong adds, these and similar facts which he could mention made a deep, an indelible impression on his mind; and says if his desire be great to make their results recollected by others, the vital importance of the subject must plead his excuse.

In Forbes translation of Laennec, p. 596, we read: "We are too little in the habit, in this country, of adverting to the ancient doctrines of *repulsion* as a cause of internal disease. There can, however, be no doubt of their truth; and this I [Forbes] believe, is as conspicuous in the case of diseases of the heart, as in any other. The foreign writers are perhaps as much disposed to overrate, as we are to underrate the influence of this class of causes. For many cases of disease of the heart supposed to have originated in the repulsion of cutaneous eruptions, the reader is referred to the works of Testa (t. 1. p. 119) and Kreysig (sect. 11, cap. iii.) The last named author considers the *membranes* of the heart, both external and internal, to be the

parts chiefly affected in such cases, a circumstance which he attributes to similarity of texture; and he states, moreover, that in certain febrile eruptive diseases, particularly measles and scarlatina, he has found these membranes simultaneously inflamed with the skin.

In Johnson's Med. Chir. Rev. vol. 19, p. 361, we find the detail of a case of fatal hydrocephalus, produced by the suppression of itch, related by a Dr. Walker, while Dr. Johnson adds in a note, to the paragraph which is entitled: "Bad effects from the cure of Itch." We [Dr. Johnson] have seen three or four cases of fatal muco-enteritis following the speedy cure of itch, by the use of sulphur ointment. Indeed these cases have made such an impression on us that we do not now venture to prescribe this application without extreme attention to diet, and preparation of the patient by mild laxatives. Practitioners should be very cautious in these cases."

Of Napoleon it is well known, that at the siege of Toulon, an artillery-man being shot at the gun which he was serving, while Napoleon was visiting a battery, he took up the dead man's rammer, and, to give encouragement to the soldiers, charged the gun repeatedly with his own hands. In consequence of using this implement he caught an infectious cutaneous complaint, which being injudiciously treated, and thrown inward, was of great prejudice to his health, until after his Italian campaigns, after which, for the first time, he showed that tendency to *embonpoint* which marked the latter period of his life.

STINGS OF INSECTS.

In accidents arising from venomous insects, Camphor is almost a specific, whether the insects have been swallowed, or have introduced their venom through the pores of the skin.

PRACTICAL COMMUNICATIONS,

BY C. A. TIETZE, M. D.

Member of the Lusatian and Silesian Hom. Soc.

Translated from the German,*

BY JOHN SCHUE.

FLOODING AFTER CONFINEMENT.

Mrs. G. Bundermann, aged 30, had, on the 12th of April, 1841, been delivered of her second child without accident, which, however, she was unable to nurse, inasmuch as the milk, which had appeared in sufficient quantity, had again disappeared three days afterwards, so that on the 16th she could not offer the breast to the child. On the 18th of April, after the Lochia had already ceased, hemorrhage again took place, which was repeated on the morning of the 19th, and twice again during the afternoon of the same day, in pretty large quantities, of a dark color, and mostly in coagulated lumps. The night succeeding she slept quietly for about four hours, and no hemorrhage took place. This forenoon it again appeared, but in diminished quantity; yesterday she had fainted on rising from her bed, and was obliged to return to it, after which the flooding soon ceased. For several weeks past she has, besides this, suffered from a cough, expectorating mucus, and for the last few days with heat and perspiration over the whole body, during which, however, the face remained pale and cold.

April 20th, I prescribed Sabina, which was repeated the following morning.

* Archiv. für die Hom. Heilkunst, vol. xix. part 2, p. 138.

April 22d. No more flooding. The patient has been able to rise several times during the day. For the evening of this day I left another dose of Sabina, and for the evening of the 24th, and morning of the 25th, I left China, as she complained much of a general debility. April 28th, after the second dose of China, another hemorrhage took place to-day, although the patient had not left her bed either yesterday or to-day. I again exhibited Sabina on the morning and evening of the 25th, and also on the evenings of the 26th, 27th, and 28th.—April 29th. The patient has left the bed only for a very short time, and when compelled by the most urgent necessity, but has had no other attack of flooding. For several succeeding evenings she took Sabina.

May 2d. The patient at times walks in the room without experiencing disagreeable consequences. A good appetite, which till now had been wanting, begins to appear. Continued Sabina once a day, in the evening. On the 6th the woman felt quite well, and had been on her feet all day.—May 7th and 10th. She took two more doses of Sabina, and was then dismissed as cured.

INCIPIENT ABORTUS.

Mrs. Bitterlieb, aged about 20, strong, active, well-made, of a sandy complexion and sanguine temperament, mother of two healthy children, had been pregnant for three months, during which time, as during her preceding pregnancies, she enjoyed excellent health. On the 3rd of March she danced in company, after which she was taken with bearing down pains in the abdomen, and soon afterwards with a very copious hemorrhage. She therefore sent for a midwife, who, not knowing what to do, sent for a physician, by whom she was dismissed, with the remark that "he could do nothing, the child must come away." As a few cups of Balm tea would make matters no better, and even a cutting pain in the abdomen and con-

stant hemorrhages appeared, and the danger had become pretty evident, I was sent for. I found the woman pacing the room, the paroxysms of pain in the abdomen compelling her, however, to sit down after short intervals of walking. The pains in the abdomen, I concluded to be contractions in utero. She felt very weak and exhausted. The pulse was normal, and there appeared no other alarming symptoms. The blood which passed her was of a dark color. The os uteri was low down and turned towards the excavation of the sacrum, and not to be reached without difficulty. The portio vaginalis was softened, the orificium opened but little. I immediately, March 5th, administered Crocus, and recommended rest on the bed. There was no change necessary in diet. No more blood passed in the night, and the cutting pains in the abdomen ceased.

During the morning of the 6th the sensation of bearing down reappeared, and repeated attacks of flooding again took place, in consequence of which I prescribed *Secale Corn.* towards noon. During this afternoon and the succeeding night the patient was pretty comfortable. The bearing down pains ceased, but constant traces of blood were observable.

March 7th. I found to day—Renewed bearing down, cutting pains in the abdomen, discharge of clots of blood, extreme anxiety, and disturbed state of mind, chilliness, even in the warm bed. The portio vaginalis I found as before.

Pulsatilla was given, soon after the exhibition of which the patient fell asleep, and the pains and hemorrhage ceased. The latter not having returned, the woman found herself sufficiently well on the 8th to leave her bed, to which she would not be confined any longer. March 10th.—The patient is perfectly well, and has assumed all the duties and cares of the housewife. This she continued to do in as good a state of health as she ever enjoyed, till the 24th of March, when, after rising per-

fectly well in the morning, she experienced an urging to stool, and had scarcely reached the night-vessel, before the fœtus was expelled. But even this did not interrupt the good state of her health, and she has since passed through several confinements without difficulty.

PREDISPOSITION TO ABORTUS.

Christina Luke, aged 23 and married, had the first abortion shortly after marriage, the second a few months afterwards, and the third at Easter, 1835, each in the third month of pregnancy, and without any assignable cause. Previous to her marriage she menstruated regularly and without difficulty, but since the last abortus she complains of lack of appetite, stitches in both sides under the false ribs, and great debility. The catamenia reappeared, attended by frequent chills. This was all the messenger knew. I accordingly sent China, (May 15, 1835). Three days afterwards the woman called on me herself. She was of a strong frame of body, florid complexion, sanguineous temperament, hair light brown, and eyes blue. Exclusive of the facts already stated, I was informed of the following in addition. The last abortus took place nine weeks ago, and the catamenia reappeared for the first time on the first of May, very copiously, and of a dark color, with cutting pains in the abdomen. Formerly she never felt any inconvenience during their presence or at their appearance. During menstruation she has dizziness in the forehead, and painful pressure from within outward. Little inclination to eat, even when hungry. After meals nausea for a short time. Bowels regular—great fatigue in the limbs and general debility. When in the open air feels soon chilly. Sleeps very heavily at night, and wakes with difficulty. The hands are covered with warts. As China appeared to be indicated, and the

first dose appeared to have had a favorable effect, I gave her this day the same drug in solution. On the 7th of June the menses reappeared, but this time without cutting in the abdomen. The quantity of blood was large, but of a lighter color than the last time. The dizziness, headache, nausea, sensation of debility, and chilliness in the open air were also absent. Appetite remained poor as yet. To-day she took Sabina in solution. August 18.—The woman called on me to-day, after she had taken Sabina for several weeks. This is the sixth week since the last appearance of the menses, although she menstruated quite normally the last time. The more so as for the last eight days she experienced after meals, nausea without vomiting, aversion to coffee, which she was fond of formerly, and a pressing pain in the forehead. She took Nux Vom. on the 18th and Sabina on the 23d of August, and on the 25th following, Natrum Mur. July 17, 1837, Natrum Mur. which she continued to take until the beginning of October, 1837. All difficulties disappeared by degrees, and in due time she was delivered of a healthy child, which yet lives. She again conceived several times, after having nursed and weaned the child, and having menstruated regularly; but each time miscarried in the first week of pregnancy, and for the last time in June 20th, 1838. As the catamenia again disappeared, she thought herself again pregnant, and called on me to prevent a repetition of abortus. I prescribed six doses of Sabina, one every ten days. This sufficed to carry the patient to a normal and safe confinement. She was again delivered of a child, which is also alive at this day; after she had weaned the child, after having nursed her for nine months, she again became pregnant, and again miscarried twice in succession, first in the tenth, and then in the twelfth week of gestation. September 16th, 1839, the woman again sent for me. She thought herself preg-

nant for the last twelve weeks, and was taken four days ago with cutting pains in the abdomen, and with discharges of clots of coagulated blood. I prescribed Ipec. and Crocus., to be given every four hours in alternation. The next morning, however, she miscarried, as might have been foretold. In spite of all admonitions and cautions, I lost sight of the woman until June 25th, 1840, when I was told by a messenger that she was again in the tenth week of pregnancy, and a discharge of blood, but without pain this time, had again set in. I sent her Sabina, doses iv; to be taken once in four hours. The patient, however, miscarried the next day, as also on Nov. 17th following. This last abortus had prostrated her strength very much, and she was consequently more inclined to heed my cautions. On the 26th Nov., 1841, she called on me with the intention of going through a regular course of treatment. On the 26th and 29th of November, I gave her Sabina, the 4th, 14th, and 18th of December, Calc. carb. When I saw her January 7th, the woman was as active and well as she had ever been. January 31st, and February 4th she took Lycopod. Yesterday the catamenia, appeared but without the least difficulty. February 8th, 14th, 25th, and March 15th, and 30th, she took Lycopod. April 14th, eight days ago the menses were to reappear, but did not, probably, in consequence of conception. Lycopod. had several times before done me evident service, when I was led to believe in the existence of weakness of the organs of generation, impotency, etc., etc. My opinion in the present case was, that the repeated miscarriages, occurring as they did in a subject otherwise perfectly healthy, might justify me in supposing a local weakness of the organs of generation. I therefore administered Lycop. and Sabina in alternation, viz. April 14 and 30, Sabina; and April 22 and May 8, Lycopodium May 13th. The catamenia have not reappeared, and there is every symptom to make

pregnancy probable ; such as want of appetite, but this time without nausea, heaviness in the legs, enlargement of the abdomen and mammæ, and secretion of milk in the latter, frequent passage of watery mucous. May 13th, the patient took Sabina, the 27th Sabina, May 19th, Lycop., June 4th Lycopod. On June 12th, 1841, the woman is perfectly well, and has passed the period within which she was wont to miscarry. On the 13th she again took Sabina, on the 24th Lycopodium. April 12th. To-day my patient called on me herself. She complains of nothing, and is quite active. Fourteen weeks have now passed since she last menstruated. I gave her Sabina for July 12th and 19th, and Lycop. for July 24th. When the woman again called on me, which was in August 11th, she had continued perfectly well, but although the abdomen had reached the dimensions of that of a female beyond the middle period of gestation, she had not felt any quickening of the fœtus. For August 11th and 21st, she took Sabina, for August 27th, Lycopodium. September 3. The woman is perfectly well. Since the close of August she has perceptibly felt the motions of the fœtus, and not deeming herself in danger of another miscarriage, discontinued medical treatment. She was in due time delivered of a healthy child.

POISONING BY OPIUM.

The principal antidote is *Black Coffee* or *Vinegar* ; afterwards some doses of *Ipec.* will do good. If, after the use of *Ipec.*, there still remain morbid affections, recourse may be had to *Merc.*, *Nux vom.*, or *Bell.*, and these medicines ought also to be preferred in chronic affections from the abuse of *Opium*, as a remedy.

PRACTICAL REMARKS

ON

MENSTRUATIO NIMIA (EXCESSIVE CATAMENIA)

AND ITS TREATMENT.

BY DR. F. PATZACK,

Member of the Hom. Soc. of Lusatia and Silesia.

Translated from the German,*

BY JOHN SCHUE.

Among the diseases affecting the female organism, there is, perhaps, none which exerts a more pernicious influence on the health of females, than a too copious and too frequent flow of the catamenia. For, independently of the disturbance produced in the organs of generation and gestation, by the originating cause, the repeated loss of blood will affect the whole system to such a degree, that the most alarming effusions of the thoracic or abdominal organs will generally ensue. Thus we may, as an immediate consequence, observe blenorrhœa from the parts of generation, congestions and inflammations of the uterus and ovaria, with their consequences, sterility, more frequently still coxalgia and cardialgia of the most violent kind ; passive congestions and obstructions in the pancreas and liver ; in other cases, again, we see the organs of respiration suffering, hence blenorrhœa of the lungs, incessant pains in the chest and asthma, palpitatio cordis and cardialgia ; and lastly, but not less frequently, we can not but ascribe to a loss of blood the predominating affection of the cerebral nerves, or an increased

* Archiv. für die Hom. Heilkunst, vol. xix. part 2.

general sensibility of the nervous system, accompanied with a nearly complete incapacity of reacting against usual impressions. I say we cannot but deem these phenomena as the consequences of loss of blood. It is therefore our duty to use our best exertions to discover means to effectually overcome this fatal disease. And here, as in many other instances, where the old school is exposed in her impotence, it is Homœopathia which points out the ways to combat successfully not only the evil itself, but all the diseases consequent thereon. Although the remedies which I intend to make the theme of the following remarks, have at different times, and in different Homœopathic works been recommended to the profession, yet the great importance, and practical utility of the subject as well as of a methodical application of the drugs, as an extensive experience has proved them to me, must excuse a renewed attempt to bring the subject before the profession.

If, in the first place, we consider the *stadium metrorrhagiæ*, we may lay it down as a rule applying to a great majority of cases, that drugs are to be exhibited at this period *only*, when the flow is very copious and of long duration, and drugs when thus applied can only be expected to act as palliatives. These discharges possess in that case the characteristics of debility, and are by the old school designated as "Passive." In such a case a few doses of Ipecacuanha are sufficient to stop the hemorrhage. I less frequently used Crocus in cases where the flow of blood was of long duration, and the color of it very dark, or Sabina to females of an advanced age, who had miscarried several times, and had passed their climacteric, and where the metrorrhagia was of uncommon duration. In a case of a young woman who had married early, and at the age of twenty-one gave birth to two children, and miscarried once, who was of an irritable constitution, and in whose character pride and

contempt of others seemed to predominate, and whose catamenia flowed more copiously when at rest than when moving, Platina proved of great service. In two other cases, one that of a young, unmarried female, another of an elderly lady, whose catamenia always appeared too early, were accompanied with a watery diarrhœa, and lasted too long, Veratrum afforded immediate and lasting relief. I have been lately led, through Kopp's recommendation, to give Argentum Nitricum, with good effect. The case was that of a young female, aged seventeen, whom I suspected of a dissipated life, and who, for longer than a fortnight had suffered from periodical hemorrhages, whose abdomen, particularly in the region of the ovaria, was very tender, and who complained of pain in the lumbar region, and down the thighs, which, in combination with the other symptoms, particularly difficult urination, seemed to indicate an inflamed and irritated state of the ovaries. Aconitum, Bryonia and China, although they diminished this state of irritability, seemed yet to have no influence upon the hemorrhage, and it was not until I had recourse to Argent. Nitr. that the latter ceased, of which I was informed by the patient herself, three days after she had begun to take the drug.

But of far greater importance is the exhibition of drugs during the period intervening between the catamenial discharges, in consequence of which it is therefore generally unnecessary to act during the actual flow. The following "Polychrests," when administered at this time, proved eminently successful, not only in regulating the menses, but also in removing the bad consequences of a too frequent and too copious hemorrhage, both in the organs of generation and the other organs of the system; viz. *Nux vom.*, *China*, *Sulphur*, and *Calcarea Carb.* The method followed by me in the application of these drugs is the following. On the evening of the first day

after the cessation of the catamenia, I gave a dose of *Nux vom.* thirty-six hours afterwards, in the morning, a dose of *China*, thirty-six hours after this another dose of *Nux*, and then again after the same interval, *China*. This alternation between *Nux* and *China* was continued during the first half of the intervening time. The latter half was begun with the exhibition of a dose of *Sulph.*, which was followed two days afterwards with *Calc. carb.*, after which these two drugs were continued alternately during the remainder of the latter half of the intervening period.

The effect of this treatment in cases even of very long standing, was most surprising to me, viz. a speedy restoration of the general health, and a more regular appearance and duration of the recurring catamenia.

The following are selected at random from a large number of similar cases.

1. Baroness C—in P. aged 27, a woman of a very lively temperament, and somewhat delicate constitution, had been confined normally five times within six years, but had flooded excessively each time, and in her last confinement suffered greatly with protrusion of hæmorrhoids. She did not herself nurse the child, and her catamenia appeared immediately after parturition very copiously, and continued to appear so at regular intervals, during the whole time she was not in a state of pregnancy. Four weeks after the last confinement, when in the state of menstruating, I was consulted. *Ipecacuanha* diminished the discharge of blood, *Nux vomica* and *China* the protrusion of the hæmorrhoids. After the latter I gave *Sulphur* and *Calcareo Carb.* This was sufficient to procure a nearly normal discharge of the catamenia at their next appearance, and after a few months a complete removal of all the difficulties.

2. Baroness R, a sister of the preceding, is also a lady of a delicate constitution. Six years ago she lost much blood after a confine-

ment per forcipem, and has never since been able to regain her former strength of body. Her catamenia since that time were not only too copious, but also of too long duration, and besides these she suffered from another evil, which would not give way to all the endeavors of her Allopathic family physician, and though he persisted in them most perseveringly; it was for this principally she sought the aid of Homœopathy. The doctor very imploringly advised her not to do so. She complained of continued, pressing, and at times, gnawing, pains in the region of the ovaria, more especially on the left side, which, by any mental or physical excitement, particularly before the appearance of the catamenia, were heightened to such a degree, that they extended over the whole abdomen, more particularly over the bladder, in the lumbar region, and downwards from the hips, so much so that it was impossible for her to take any exercise. She at the same time had great aversion to sexual intercourse, and her husband complained to me of her non-participation in it. The above named remedies, continued for three months, completely restored her, with the exception of the pains in the region of the ovaria, which manifestly indicated a state of chronic inflammation of those organs. Against these pains I administered *Bryonia*; the success was almost immediate and complete, so that at this time, after a period of three years, none of the abovementioned difficulties have returned.

3. Mrs. A., of Neustadt, aged 30, of a feeble constitution, consulted me sometime in February, 1838. For years she had suffered with too copious and too frequent catamenial discharges; to this has been added, for the last year, *Leucorrhœa*, and for five months after a confinement, cardialgia, accompanied by pressing pains extending to the back; she at the same time had nausea, but without actual vomituration; the bowels were habitually costive. This patient also was completely

cured by the above mentioned remedies, within two months from the beginning of the treatment.

4. Mrs. Major v. B. aged 34, had menstruated too copiously ever since the first appearance of the catamenia, but still more so since her marriage, during which she had given birth to five children, without the occurrence of any thing unusual. As a consequence of such an excessive loss of fluids in this patient, there appeared an extraordinary degree of sensibility of the nervous system, so that even trifling causes, particularly fright and anger, would produce an uncommon degree of excitement in the vascular and nervous systems, such as palpitation cordis, trembling, cardialgia, cephalalgia, the most violent odontalgia, etc. The consequences of this of course were an increased weakness, irritability of mind and low spirits. This case too, was cured by the above named remedies.

5. Mrs. Captain W., of a vigorous constitution, and a large frame of body, aged 40, had given birth to five children, and had miscarried several times, and for the last fifteen years, had suffered with a frequently returning and most violent cardialgia. For the last two months she has been, for such an attack, under the treatment of a famous Allopathic doctor of this city, who, by leeches, narcotics, and stimulating means, has reduced her to such a state, that her family thought her near death, and the doctor himself declared that the liver was highly diseased, and the only aid possible was to be sought for in the Carlsbad (a medicinal spring). For this state of things I was consulted. I perceived without difficulty the former irrational treatment, and keeping in mind the producing cause, viz. excessive weakness, consequent upon a too copious and too frequent menstrual discharge, I gave my medicines accordingly. After the first dose of Nux vom. a slight aggravation took place, but after the first few doses of

China the patient rapidly mended and continued to do so, till she had perfectly recovered. Sulphur and Calcareo were given after this, and the next menses already appeared later and lasted only to the fifth day. She finally completely recovered, and has not had a relapse up to this time, a period of two years and a half.

6. Mrs. F. of M., aged 35, apparently of vigorous health, has since the birth of her fifth child, suffered from excessive general weakness. To this was joined vertigo, frequently accompanied by violent headache, against which venesection was repeatedly had recourse to. Besides this her menses returned very copiously every three weeks. After having used the above mentioned remedies for four weeks a great change in the state of her health was produced, and she finally recovered completely.

CASE OF POISONING BY CANTHARIDES.

BY

H. G. DUNNEL, M. D.

On the 26th September, 1841, a boy of 12 years of age was brought to me by his father, on account of some suspicious symptoms of disease, which had given him great perplexity.

To day he has been informed by one of his school mates, that several of them had conspired together, and given him, three weeks since, an apple in which they had inserted a quantity of Spanish Fly. He recollects eating it, and has not felt well since. For several days past the following symptoms have been gradually coming upon him, and how they have arisen he is unable to describe, only

that they have increased from day to day, ever since.

The symptom for which he sought my advice more particularly is a tumefaction of the prepuce, of a red, hot, and diaphanous nature ; a phimosis. It is not as large to day as yesterday ; it was then the size of a small hen's egg, it is now that of a large walnut, and there is issuing from beneath it a purulent secretion ; day before yesterday commenced great soreness in urinating, which is some less to day. The phimosis began yesterday, complains of pains and stiffness of his limbs, is continually tired, and more especially on the *right* side of the body, numbness of the arms and legs. Headache, with dizziness. His head and his hair feel stiff to him. The right half of the face is quite swollen. Eyes weak and watery, to which he is subject, but now the letters on the paper are green and yellow, cannot distinguish an object until he nearly closes the lids, and shakes the head two or three times. The conjunctiva slightly suffused. Has an incessant drumming in the ears. Nose swollen ; red and sore in the interior, several itching-burning vesicles upon it ; constant stench before the nose, that passes down his throat ; burning soreness of the throat, which is inflamed. Loss of appetite, no sickness of stomach, nor tenderness of the epigastrium. The bowels seem unaffected, painful tension along the inguinal canals, and the testicles around the pelvic region : has a yellow spot of the size of a two shilling piece on the abdomen, near the umbilicus, and another on the inside of the left thigh. Violent jerking of the heart, that runs quite to the head ; is constantly cold ; cannot sleep at night on account of the cold, although he is very sleepy.

Is alarmed and agitated, the chilliness wakes him at two in the morning, and he can sleep no more.

Feels worse when out in the air. Cardialgia and sour eructations, especially after drinking.

Sept. 27th. The lad was to see me to-day, continues much the same, only the legs are weaker. The rending pains in the arms are not as severe as yesterday. The pelvic region and the testicles are very much distressed. The penis, and most especially the fore skin, is covered with small blisters, similar to the commencement of a blister from Ung. Epispastic. The prepuce is not as much swollen. Throat very painful. Chilliness continual.

Has taken Camph. Spts. gtt. x. every four hours, and is to continue its use.

28th. No relief. The whole penis covered with itching blisters, that break and scab, much more numerous than yesterday, was not so chilly last night, but could not sleep.

29th. The stiffness of the right arm and weakness of the legs continue, slept last night, sight some better, the itching of the vesicles upon the penis is greater, and the dragging pains of the spermatic chord are worse. Bowels move daily, no eructation or heartburn. Takes Camphor every hour.

30th. The swelling of the point of the nose increased, and has now itching vesicles upon the left shoulder, and one on the extremity of each elbow, about the eighth of an inch in diameter.

Oct. 2nd. Has not slept these two nights on account of the itching of the vesicular eruption, which has spread over his legs, his fingers have several upon them. The phimosis has mostly disappeared. The scrotum is covered with vesicles, some of which have broken and scabbed, and discharge a puriform secretion. The nose is very much swollen in the morning, but diminished towards night.

Oct. 4th. Very lame, more so than ever, the eruption over the legs has increased, and is very troublesome.

Oct. 5th. Lameness of legs unabated. The arms relieved, but the soreness of the eruption increases, the itching not so intense. Itching of the eyelids, the eruptions on the legs have

scabs, and underneath is purulent matter. Sleeps in the fore part of the night, but wakes at twelve, seems as if it were impossible to sleep any more, falls asleep at two, and wakes about half past three, and cannot get to sleep again; he is constantly dreaming of quarrels and fights with the boys, in which he beats in their heads with his fists, and is covered with blood. Talks loudly in his sleep. Taste in his mouth of resin or pitch, no appetite, the least particle of food satiates him. Is so intensely sore over his body that he cannot endure his brother, who sleeps in the same bed, to touch him. Thinks he feels as if the bones of his legs were rotten. In the morning has intense itching of the palm of the left hand, always feels a pricking where the blisters are about to appear. The vesicles on the shoulder are spreading.

Oct. 8th. The arms, legs, and eyes are easier, sleeps at night. The itching of the eruption continues very severe at night, and comes as suddenly as if it were a shot. They smart in the day, but itch at night. The scabs fall off and leave a smarting of the skin underneath, urinates freely. Numbness of the right hand continues. The yellow spots on the abdomen and leg still continue. He says that he is all the time uneasy, he must be doing something or another, he snaps his fingers or picks them, his limbs move about in spite of him, he remembers a little girl who lived opposite to them, two years since, and who had the St. Vitus's dance, and he acts and jumps as she used to do, he must keep his hands and feet continually jerking about.

From this time there was a gradual abatement of the system, and as I did not see him but once in four or five days, I have not been so particular in noting the farther progress of the symptoms. They had not all disappeared until the 48th day after the ingestion of the Cantharides.

I have been particular in mentioning many

circumstances, perhaps, that would seem to a casual observer unnecessary, but I have ventured to be prolix rather than alter materially the very language of the patient.

It was at the time an interesting case to me, as I hope it may prove to yourself, and your readers; because it confirmed in my mind the accuracy of the pathogenesis as given by Hahnemann.

It will be seen that the symptoms lasted longer than is stated even in the last edition of *Jahr*, which gives it a duration of ten days longer than the previous edition, notwithstanding he was kept under the free use of its reputed antidote, Camphor.

I am, &c., yours,

HENRY G. DUNNEL.

REVIEW.

"THE BRITISH JOURNAL OF HOMŒOPATHY. PUBLISHED QUARTERLY. EDITED BY J. DRYSDALE, M. D., J. B. RUSSELL, M. D. AND FRANCIS BLACK, M. D. NO. I. JAN. 1, 1843."

The appearance of this work is undoubtedly a sure harbinger of the permanent establishment of Homœopathia on a highly respectable and useful footing in Great Britain. But we are pained to anticipate, also, that it will prove a signal gun for the opponents of our method, there and elsewhere, to renew their hostilities against the personal characters of its advocates, and to trump up all the captandum resources which have characterized the Allopathic side of the contest on the continent for the past twenty years. Be it so: the truths of a useful reformation should not be kept back the tithe of an instant, through fear of the offences they may awaken; humanity demands their publication, and she gains ever by the moral convulsions which ensue. Nor

should the publication of a humane truth be delayed till the wise and the illustrious find it convenient to give it their consent and patronage ; for then the best and greatest interests of the race would too frequently stand in abeyance to the selfish interests of the few, the very few, whom the world agree to consider wise and illustrious.

On the other hand, he lays unhallowed hands on that good Ark of Testimony, who, unbidden of Charity, seeks to identify himself with its sacred progress ; no motive other than the love of mankind can save the partisan of a real reformation from a worse private fate or ultimate public position than those which await the most daring and reckless of its opponents. We take the liberty to utter this maxim, taught by the history of all reformations, not because we feel secure as to our position in this instance, for we are not sure in this respect, but because it is right that Homœopathia should advance, even though some fall before it who seem to be stretching out the hand of assistance.

We assume Homœopathia to be a real reformation, of universal importance, because its adoption, imperfect as it is and necessarily must be for many years, and perhaps, for ages to come, involves the entire abandonment of the dangerous materialism which, whether perceived by all the adherents of the common school of medicine or not, forms its true substratum ; because it replaces an unsound mode of making theories, a mode which in every case (surgery excepted) presumes upon knowledge which man never did, nor ever can, possess, with one which is wholly within the possible, the actual, and demonstratably just limits of testimony ; and because it must save millions, annually, in all ages to come, from the barbarous and too often fatal infliction of drug-diseases, which not only abridge the comforts of the human race, both moral and physical, but powerfully contribute to its

already perceptible decline, by increasing its transmissible infirmities in both respects.

Homœopathy rejects materialism, for reasons which will appear plainly enough to those who will study Hahnemann's *Organon* as it ought to be studied with reference to this all important point ; and Allopathy adopts materialism, because without regarding life as a function of matter (and merely such) it could not construct its fundamental notions of the causes of disease, its real basis of the bold conflict it undertakes, its essential science.

Homœopathy stops her search after the object of cure where nature and the Creator cease to reveal the dread secret of vitalization—it stops where the phenomena of this outward nature end ; it makes use of the senses only to get at its facts ; it creates no facts by means of a Promethean daring, as to the quantitative or qualitative changes of the vital essence ; it affects no knowledge respecting the essence or proximate cause of disease, for it will not falsely pretend to perceive what the human senses cannot perceive, nor the human understanding comprehend, things which belong to the Infinite Mind, the immediate instruments of the Infinite Power.

The difference between Homœopathy and Allopathy is not less striking, nor one whit less reconcilable in reference to the philosophy of disease (if such a phrase be permitted) than is the disparity which exists in respect to the therapeutic laws which they propose to obey. If the one be true, the other cannot be so ; one or the other must fall, though the survivor may undergo very great modifications as to its *ratio medendi*.

The contest is scarcely begun ; unless some new element arise, some important discovery in physiology come to light, of which at present we have no conception, it will certainly last another half century at least. And we think, with what truth time must disclose, that the strength and spirit which our British breth-

ren bring into the discussion, will be the measure of its endurance. We have waited long and patiently for the advent of an English respondent of our cause, and we are happy to say that this does not disappoint our earnest hopes: it is respectable both as to manner and matter, though if one-half of its able array of foreign correspondents redeem their implied pledge to aid in its support, there can be no doubt of its increasing value.

We earnestly entreat the respectable editors to eschew the middle-measure men of the school, those who prate of the possibility of practising both systems. Whatever may be the result of free discussions as to the doses, aggravations, and the doctrine of dynamizations, not the least doubt can be entertained as to the integrity and absolutism of our primordial law of selecting remedies.

We present our readers with specimen sketches, from each of the principal papers. The first is a paper from the pen of Dr. Russell, of Edinburgh, on the "ORIGIN AND PROGRESS OF HOMŒOPATHY."

"Such, then, is the first systematic announcement of Homœopathy, on which we would make a few remarks. *First*, As to its origin.

"The idea that medicines owed their power of cure to a power of exciting a disease similar to the one they cured, was given by observing an ague excited by cinchona. But Hahnemann did not jump at his conclusion from this one observation, but sought to find in all other specifics some relation between the diseases they cured and the effects they produced on those in health. And we must remember that his mind was on the watch for some indication. Shall we, then, blame him for attaching undue importance to one experiment? As well might we blame Newton for resting his law of gravitation on the apple's fall. In both cases the original observation was but

the finger-post of the road to truth. 'Nature speaks to us,' as Liebig profoundly remarks, 'in a peculiar language, in the language of phenomena; she answers at all times the questions put to her; and such questions are experiments. An experiment is the expression of a thought. We are near the truth when the phenomena elicited by the experiment correspond to the thought, while the opposite result shows that the question was falsely stated, and that the conception was erroneous.' The question of 'Is this the road?' is much more likely to obtain a satisfactory answer in physical, as well as critical research, than the vague unconceptive query of 'Is there a road?'

"In the *second* place, there is something extremely honest and outspoken in the style of the paper. Earnest and bold, yet courteous and friendly, he seeks only to convince, not to proselytize, and addresses the reason, never the passions, of his readers. What is there in this paper that can justify the disgraceful epithets that have been heaped on Hahnemann? And yet this paper contains the whole marrow of the question—the very 'head and front of his offending.'

"In the *third* place, it is very remarkable that this essay, containing so full a development of the system, should notice *the dose* only in a foot-note, warning the profession of the danger of employing large doses when testing the Homœopathic law; and yet this question of the dose,—so insignificant in itself, about which even among Homœopaths there is a great variety of opinion,—this question of the dose is the rock on which the profession stumble—the butt of empty laughter to the multitude who do not see its natural evolution from the primary proposition, and the only feature which those who found their judgment on a passing gaze at the outside, are in a position to notice.

"To this detail of his system succeeded a

series of papers with various titles, but in which his ruling idea to reform medicine by exposing the danger of treating artificially classified diseases, is always conspicuous. In one he denounces the attempt to storm disease by large doses of numerous medicines. 'Such,' says he, 'is not the wish, of the all-wise Creator, who in nature effects great and various designs by the simplest machinery; and surely the remedies which he created are likewise so endowed, that each possesses a certain power, through the right employment of which in small doses, great and many cures might be effected. Would that, instead of plunging into empty speculations and theories—into inexhaustible talk and scribbling—we did but seek to know accurately the properties of medicines!'

"In another paper he exposes the fashionable systems of cure. The first is *the cure of names*. For example, the patient has the gout—then let A, or B, or C, be tried, and so go through your list of gout medicines, until you hit upon the right one.

"The *second* is the *cure of symptoms*. In this, *general* symptoms are *generally* combated. Thus, your patient has a dropsy; then let a diuretic or diaphoretic be given to reduce the swelling. 'Here is a dropsy, and little urine is passed; the doctor must increase the flow of urine. Squill stands at the head of the diuretic brigade. This, then, is ordered. At first it expels much water; but, alas! by constant use, less and less. Symptoms of exhaustion set in—loss of appetite—strength and sleep—the swelling enlarges. Then does the doctor allow the patient to sink quietly to his grave, when nothing more avails, having first shown that he could for a short time increase the flow of urine.'

"It is wonderful how men of fairness and reflection can harp upon so silly an objection to Homœopathic treatment, as the absence of manifest effect of the medicines given; surely

it is obvious that the retreat of the disease rapidly, and without disturbance of the system is the effect sought; and the only effect obtained in a perfect system of cure. Every so-called effect of medicine is an exhibition of our weakness, and the imperfection of our art. It shows, not that the disease, but the system, is affected. This lamentable sophism has done much to perpetuate the use of strong and mischievous measures—blinding the eyes of the sufferer to the sad fact, that these measures are strong, not against his malady, but against himself. 'The physician does much, only not what he ought; he works wonders, but seldom a cure.'

"The *third* method is the cure of the ultimate cause. The knowledge of the ultimate cause of disease, however, is quite unattainable. Pathological anatomy shows only its effects—not itself. 'Tolle causam' is an excellent maxim; but if we treat diseases without *knowing* their ultimate cause, but only guessing at it, then we treat phantoms which have an existence only in our own mind, and sadly mistreat our patients. While the principles of treatment are false, the plan on which they are pursued is absurd. The whole art of prescription-writing is repugnant to sense, and should be immediately discontinued. 'The physician,' observes Hahnemann, 'in writing his prescription, ordains to each ingredient his distinct office. This shall be the base; that the adjuvant; the third the corrective; the fourth the derivative. I strictly order that none of these ingredients presume to leave his allotted post. Let the corrective not be negligent in covering the blunders of the base; but let him not presume to overstep his limits, and act against the designs of said base. To thee, Adjuvant, I commit the mentorship of the base; thou art to help him as thou best can; but attempt not with officious zeal to play an independent part. Co-operate entirely with him, although thou art quite a dif-

ferent thing. Such is my order. To the joint wisdom of the whole I commit the charge of the expedition. Let us see how nicely you can drive all impurities out of the blood, without harming the unoffending; arrange and attune all that is deranged and discordant. Your commission affords you unlimited power. You must reduce excessive irritability of the muscular fibre, and sensibility of the nervous system. See you the twitches in yonder arm? Fly to their suppression. That fellow has got jaundice; you must bleach his face and deobstruate his ducts. You, most worthy Base, have been accredited as a most admirable deobstruent by one of the last pamphlets from England; to you I commit the duty of resolving all obstructions. The exact nature of these obstructions, to be sure, I do not very well know; but you will learn what is to be done when you are on the spot. To thee, saltpetre, I allot the reduction of that putrid fever; don't attempt to excuse thee from the task, on the shallow pretext that hitherto thou hast always failed; have I not ordered a detachment of sulphuric acid to thy aid? I know thou wilt pretend that with sulphuric acid thou canst not agree; but that is mere rebel-talk, as if such disagreement could occur against the wish of the receipt-writer. Besides, have I not put at thy disposal a troop of derivative and alterative auxiliaries? Each of you must fulfil the office you hold in the constitutional *Materia Medica*.' Thus again, to use the words of Bacon, 'they lord it so over the medicine as the medicine does not over the disease.' 'Can it,' Hahnemann continues, 'be believed in earnest that such *mishmash* will produce the effect which might be expected from the separate operation of so many distinct agencies? as if those ingredients exerted no mutual influence upon one another! Has it never occurred to any one that two dynamic agents *never* can effect that which, if given separately, they would, that an incalcu-

lable resultant force must be produced? And how much more, when not two, but many, substances are mixed! So that your school-order of battle is of no avail—none your bases and correctives, &c. Nature works by eternal laws, without any leave of man. She loves simplicity, and with one instrument performs much, he, with many—little; let us imitate Nature. To write complicated receipts, perhaps, too, many in a day, is the acme of the worst kind of empiricism. To give but one substance at a time, and not to give a second dose until the effect of the first is over, *this*, and only *this*, is the straight path to the sanctuary of art.'

"Hahnemann, pursuing practically as well as openly teaching his system, begins to excite the dread of the apothecaries, who see the vision of their gains beginning to melt. This is not to be endured. Are these faithful allies of the physicians, who have mutually so enriched each other, to be sacrificed to a pretended reform? Are all their variegated mixtures to be henceforth utterly despised? 'Dii avertant omen!' Are there no laws to prevent physicians dispensing their own medicines? And although the avowed object of these laws is to prevent risk to the public from the incapacity of physicians, amid the crowd of other business, to mix properly their own prescriptions, and as these laws, therefore, cannot fairly apply to Homœopathic physicians who never mix at all; yet it is a legal barrier which may be used to arrest this pestilent heresy, which threatens our rich and imposing Apothecaries' Hall with total subversion. Hahnemann quietly asks, 'Had you interdicted Raphael, Titian, and Da Vinci from mixing their own colors, where would now have been their master-pieces?' But when was reason ever strong against corporations? and this legalized persecution afterwards had a great influence on Hahnemann's career.'

"In 1805 Hahnemann published a paper,

entitled 'The Medicine of Experience.' This is an epitome of 'The Organon,' which soon followed. He had now attained what he had long been seeking, a real principle of nature, instead of dead formulas of art—as a guide in the treatment of disease. This principle he had deduced from large observation; he had found it perfectly consistent with the experience of former writers, and had extensively tested it in his own practice, with the happiest results. Firmly assured of the existence of the law he had promulgated, his attention is now turned to its explanation. This explanation must never be confounded with the law itself; the one may be true, the other false. The ascertainment of a general law of action is quite sufficient as a guide to practice, and is usually the limits of human discovery. When we attempt its explanation, we leave the territory of observation and induction, and enter that of hypothesis. Shall we close to the ardent soul of the discoverer this fascinating region, and forbid him 'all high clambering cogitations?' Surely not. We should receive both his law and his explanation thankfully, and assign to each its due value. Blindly to accept an hypothesis, because it comes from the discoverer of the law for which it is invented, would be a foolish abdication of our reason—to reject it without careful examination, a wanton insult to the discoverer. The explanation which he offers of the law is, that, when two diseases meet in the system, the stronger overcomes the weaker, and he assumes that medicinal disease is stronger for the time of its existence, though not so enduring as natural disease, because the system is only occasionally susceptible to natural morbid agents, but always susceptible to the action of medicines.

Besides this explanation of the law, he lays down, in an aphoristic form, directions for the exhibition of the medicines, the amount of the dose, and propriety of its repetition. He also

gives some admirable directions as to the best method of detailing cases; and in these directions, he particularly notices the attention that is to be paid to the remote exciting cause of the disease, as well as to the symptoms. This is well worthy of noting, as his directions in this matter have been much misrepresented.

"He is now rapidly approaching a full exhibition of his system, to the furtherance of which his work *Fragmenta de Viribus Medicamentorum Positivis*, published in the same year as the paper last noticed, and containing an account of the effects of twenty-five substances on persons in health, greatly contributed. Indeed, what more is wanting for a system? He has shown that, to bring medicine to perfection, we must investigate the exact action of medicinal agents on those in health—examine the relation between this and their action in curing disease, and thus ascertain the law which shall guide us in their administration. This law he announces, and gives the facts from which it is deduced. He then proceeds to teach its application, and affords means of applying it. Truly, this looks like a dawn in medical science than any thing that has yet appeared.

"In his last paper, he enters more fully into the propriety of giving small doses. He finds they answer better, and explains how this is.

"A diseased part is much more susceptible to the action of any substance fitted to affect it, than when healthy; just as a burned finger is more sensitive to heat than a sound one; and as unreasonable would it be for a man whose finger was whole, because he felt no pain on holding it to the fire, to insist that his neighbor was fanciful because he drew his burned finger from the same position, as it is for those who ridicule the system of Hahnemann to require that doses, in order to cure diseases, must produce sensible changes on those in health. How can the same amount

of heat cause pain in a burned finger, and not in a sound one? Ridicule is a dangerous weapon, very apt to rebound on the head of those who use it.

"He also distinctly asserts the proposition, that the effects of substances in all doses are the same in *kind*, the difference in their action depending upon the degree of susceptibility of the patient, as well as on the quantity employed. A full consideration of the relative importance of these two conditions would put the 'quæstio vexata' in regard to the dose in its proper light, and might reconcile much discrepancy of opinion.

"Thus far in comparative obscurity had the system matured itself; and now the truth, that for twenty years had been working and growing in the mind of Hahnemann—confined in its influence to a limited circle—was to find a voice in almost every land of Europe. In 1790 the Homœopathic law dawned on his mind—in 1810 appeared the "Organon of the Healing Art" (*Organon der Heilkunst*.) in which this law is propounded and explained.

"To the cursory reader, even though he be charitably disposed, this work presents startling difficulties, which are best removed by regarding Hahnemann's position when he wrote it. At this time the truth of his discovery was so entirely incorporated with his own mind, by twenty years' reflection and experience, that his efforts are directed fully as much to the explanation as to the demonstration of the law; and the general arrangement of the work is such as rather to perplex. Nevertheless, the period of its publication will always mark a great era in medical science, and the doctrines and precepts it contains have worked much deeper in the general practice of medicine than at first appears. They have exerted a powerful influence, not only on those who have adopted them, but upon those who have utterly rejected them, and who must be at a loss to account for the changes, obvious

enough, that are passing over the face of medicine. Its keen exposure of the ordinary practice—its proud rejection of old formulas—its utter condemnation of time-sanctioned systems, raised against it a clamorous and angry host of opponents, who felt and resented this assault on their stronghold; while its fresh and vigorous truthfulness—its appeal to reason and experience against all the old arbiters in medicine, served as a gathering cry to numbers who had been convinced by former papers, but had not ventured openly to espouse so daring a heresy. As to the shallow sentence of condemnation passed by our reviewers on the work, it was no more than might have been looked for. It was not to be expected that a book so full of novelties, written, too, in an intricate, severe style, and presenting so many points on which witticisms could be easily hung, should be studied with that care and candour required for its appreciation, much less that they should give themselves the pains of fairly disentangling and exposing a system which condemned them so unsparingly. It would have been, doubtless, a higher task to have measured with an artist's eye the structure as a whole, examined its foundation, and computed its proportions, than to have valued themselves on their skill in breaking down the outworks and appendages, whose presence or absence was of no consequence to the erection. By and by 'the right critique will appear, which shall neither exaggerate, praise, nor blame; for hitherto, as well the various pricking girdles (cilices) in which he was to do penance have been so wide for his body, that they slipped to his feet, as the laurel wreathes so large for his head that they fell upon his shoulders.' To all his reviewers, and in Germany many and able ones appeared, Hahnemann answered only by silence; well aware that a work like his was neither to be sunk nor saved by a war of words. If it were the vehicle of great truth, although burdened

with every conceivable fault, affording ample prey to the critics, yet once upon the stream of time, there it must float, unaffected both by the favor and opposition of contemporaries. Those who excuse their neglect of this work, by saying Hahnemann was a quack, we would remind of the words of our great essayist: 'What a quantity of noisy zeal would be squashed in dead silence, were it possible to enforce a substitution of statements and definitions for this vulgar, senseless, but most efficacious term of reproach!' And let those, who find in the voluble ineptitudes of reviewers, about German mysticism, &c., a sufficient expression of their judgment, remember the constant advice of Johnson,—'Try by all means to get rid of *cant*.' By those who wish to understand it, it will be found full of deep reflection; and without estimating its faults, it may be safely said that no one perused it with care, without deriving from it much instruction. 'If the path,' says Hahnemann, 'which I discovered, while setting at defiance all prevailing prejudices, and simply contemplating Nature, be as directly at variance with all the dogmata of the schools, as were the bold sentences, which Luther nailed to the Schloss-Kirche of Wittenberg, opposed to the spirit of a crippling hierarchy, the fault lies neither with Luther's truth nor mine.' The name of Luther was not less execrated once than it is revered now; then, before the aberrations of Hahnemann's course are condemned, let his orbit be accurately computed.

"After the publication of the *Organon*, the system no longer remained exclusively in the hands of Hahnemann; other men of talent and experience, such as Drs. Marrenzellar, Moritz Müller, Stapf, Gross, Mühlenbein, Rummel, Rau, &c. espoused it, and its influence soon spread over Europe, and reached even to America."

'Our second and last extract is from an able practical paper by Dr. Drysdale, entitled "ILLUSTRATIONS OF HOMŒOPATHIC PRACTICE."

"Whatever weight may be attached to the arguments by which the various systems of medical treatment have been supported by their advocates, still in the end, the practical value of such systems can be decided by the test of experience alone.

"But to furnish data by which the comparative merits of different methods of practice may be estimated, it is clear, that, from want of control over the patients, neither private nor dispensary practice will suffice. This can only be done in hospitals, where the patients are entirely under the control of the physician, and the results may be exposed in a statistical form.

"Although, therefore, we cannot here display the relation in point of efficacy, which the Homœopathic bears to the ordinary method, nor even prove its applicability to general practice, still our object will be amply fulfilled, if, by the narration of a few well marked cases, we can demonstrate experimentally the reality of the Homœopathic method of cure, which is still doubted by many persons who have not taken the trouble to investigate the subject; and, at the same time, illustrate some of its most obvious practical advantages.

"These advantages we consider of sufficient importance to induce all reflecting medical men, who are sincerely desirous for the advancement of our art, when once convinced of the truth of the Homœopathic principle, to devote themselves with zeal and energy to the study and further development of the method of practice founded on it.

"Viewed in a purely practical light, apart from all theoretical speculation, Homœopathy is exceedingly simple, and may be defined to

be the art of curing diseases by the specific action of medicines, or the power which medicines possess of simply and directly curing disease without the intervention of any other apparent action on the system. The fundamental propositions on which it is based are :—The adoption of the Homœopathic principle as the law of specifics, according to which the remedy is to be chosen, and the administration of the remedy in doses so small, that they do not exert any physiological influence on the economy, and are in almost all cases destitute of sensible properties, such as color, taste, smell, &c.

“From these arise all the practical differences between the Homœopathic and the ordinary method of practice, which frequently afford a contrast so strong, and, in many respects, so favorable to the former ; as, for example, the precision often attained in the choice of the remedy ; the absence of depletive measures, thus rendering it peculiarly applicable to complicated cases ; the simplicity of prescription ; the tastelessness of the medicine ; and, among many others that might be enumerated, one that is no little recommendation in dispensary practice, the very small cost of drugs.

“There are several other points of great interest in Homœopathy, but as the two above mentioned propositions are by far the most important, we shall confine ourselves chiefly to the illustration of them in selecting the following cases :—*

ENTERITIS MUCOSA.

“We may first notice a simple case of sub-acute inflammation of the mucous membrane of the intestinal canal. The patient, M. W., was a girl, five years old, of sanguine-lymphatic

temperament, and had previously enjoyed good health. Three or four weeks before admission, she began to lose her appetite and appear ill, but had continued to go to school till about a week before, when she was seized with shivering, cough, pains in the bowels, tenesmus, &c. For these symptoms she got a ‘powder’ from a druggist, which did no good, and she continued to get worse till brought to the dispensary, when she presented the following symptoms :—

“1st, Frequently, in the course of the day, pain in the bowels and passing of scanty, black, fœtid stools, followed by tenesmus ; belly swollen and tender to the touch ; no worms passed.

“2d, Tongue furred and pale, with red spots ; lips dry, cracked, and foul ; picks the nose much ; face pale and puffed, with stupid expression.

“3d, No appetite ; great thirst.

“4th, Somnolence in the day ; sleep restless, starts, screams that she is falling ; pupils dilated and sluggish.

“5th, Emaciation ; great weakness and languor, some short cough.

“This is a very simple case, it may be said, and if treated on rational principles, would easily be cured in no long time. It may therefore be useful to examine what is called by practitioners of the ordinary method, treatment on rational principles, and compare it, and its issue, with the Homœopathic treatment.

“An opinion of the nature of the case such as this would first be formed ; ‘the seat of the primary pathological change in this case, is evidently the mucous membrane of the intestinal canal, especially the colon, and this is indicated by the first and second groups of symptoms. The symptoms of deranged digestion and nutrition, are evidently consecu-

* These cases are taken from the practice of the Liverpool Homœopathic Dispensary.

tive, and those of disordered cerebral action and the cough, are sympathetic. The only rational mode, therefore, of curing such a case, is to remove the primary diseased state; and the *cause* being thus removed, the consecutive and sympathetic symptoms, which are merely *effects*, will also be removed.'

"Thus far the mode of procedure is perfectly rational, and thus far both methods are agreed; but in the manner in which the desired object is to be effected, they differ widely; a very little reflection will show that the ordinary method is in reality in many respects pure empiricism (and that often of the grossest kind;) while the Homœopathic method, if it be empirical, may at least aspire to the title of rational empiricism. Let us examine first the way in which such a case would be treated according to the ordinary *soi-disant* rational method. One of the first things that strikes us is the extreme diversity of the means employed by different practitioners in a case like this: scarcely any two, it may be said, would treat it precisely alike, each founding his treatment on his notions of pathology and the action of medicines, which, in many cases (especially in respect to the latter), must be exceedingly vague and imperfect. We can therefore scarcely be surprised to find among these means many of the most inconsistent and contradictory character. These, it is clear, cannot all be right, and doubtless many of them, if not positively injurious, are at least useless. Among the most common modes of treating the case before us, we may notice castor oil, or some other mild purgatives; leeches and fomentations to the abdomen; calomel, mercury with chalk; Dover's powder, or opium in some other form; ipecacuanha alone or with rhubarb; astringents, &c. &c.

"Any one, or several of these, would be given almost quite indiscriminately, according to the prevailing fashion or fancy of the practitioner

into whose hands the patient happened to fall; and not unfrequently the whole list would be gone through, and a great many more besides, before the termination of the case.

"How far these means, even when successful, act according to the reputed rational principles, it may be not amiss to enquire a little more in detail.

"To begin with castor oil, one of the commonest modes of treating mild cases of diarrhœa and dysentery. It is difficult to conceive on what rational principle any one who does not admit the truth of the Homœopathic principle, can administer in these diseases a medicine which produces purging and even tenesmus. The common explanation of its action—viz., that it acts by removing diseased secretions—is obviously a mere attempt to get over a difficulty which it is quite inadequate to resolve, as in nearly all cases these diseased secretions are the effect and not the cause of the disease; and therefore this procedure would be about as rational as attempting to cure a cold in the head by blowing the nose, or a hæmorrhage by wiping away the blood. But, in reality, most practical men do not pretend to administer it according to any rational principle, but admit that they give it simply because they know by experience that it produces good effects; but as to how it acts they know nothing, and in truth generally do not care—i. e. the practice is purely empirical.

"The means usually termed antiphlogistic, when considered as a whole, have as little pretension to rationality; for, to begin with inflammation, its nature is as yet far too imperfectly known to enable us to understand thoroughly the ultimate action of any remedial agent upon it. Indeed, on one of the fundamental points in the nature of inflammation, viz., whether it be an increased or diminished vital action—two diametrically opposite opinions—the profession are nearly equally divided, so that as both, with singular inconsistency,

use the same curative means, at least one half must act quite empirically. And as there are a great many other points in inflammation on which most practitioners hold no opinions at all, in reality the vast majority treat that diseased state in a purely empirical manner.

"Among the so-called antiphlogistic means that might be used in this case, the detraction of blood by leeches applied to the abdomen may, with propriety, to a certain extent, be called rational; for, whatever other changes occur in inflammation, one of its principal features is unquestionably a preternatural accumulation of blood in the capillary vessels, and any beneficial effect produced by means which directly diminish this preternatural accumulation of blood are thus susceptible of a rational explanation. Still that does not explain all the action of the leeches, for it is well known that they are more efficacious when applied to the abdomen in such affections than to any other part, although, as remarked by Magendie, there is no direct communication between the vessels of the intestine, and those of the integuments of the abdomen; so that even here there is something empirical.

"Our only objection to leeches in this case is, that, as we shall see presently, they are wholly unnecessary, for it can be cured as well, if not better, without them. The beneficial operation of calomel in such a case is usually referred to its action as an antiphlogistic, a purgative, or an alterative.

"The first of these, meaning simply anti-inflammatory, is on a par, in its pretension to be an explanation, with the celebrated answer about the cause of the hypnotic power of opium, '*Quia est in eo virtus dormitiva.*' And if we study the physiological action of mercury, and endeavor to discover on what action on the healthy body this supposed anti-inflammatory power of that medicine depends, we shall find that, so far from possessing any power of lowering capillary action, as might

have *a priori* been expected, it has quite the opposite effect, and, in fact, produces inflammation; so that here again the only rational way of explaining its action, is the admission of the Homœopathic principle.

"The action of purgatives has been already noticed, and that of alteratives will be considered presently. The exhibition of astringents, in a case like this, can have no pretensions to rationality, as the diarrhœa is a mere symptom of an ulterior morbid state, the removal of which latter necessarily entails that of the former also. The same objection applies to opium, if, indeed, the cerebral symptoms be not considered a sufficient counter-indication for its use here. The use of diaphoretic and other so-called derivative or counter-irritant means, must, however, be admitted to be rational; for although practitioners have not in general the remotest idea of the way in which they act, still as experience has shown it to be a general law, that a diseased action may often be cured by setting up another disease in a different part, this is, to all intents and purposes, a sufficient explanation to entitle the practice to the title of rational. But this painful and uncertain indirect method cannot be compared with the direct or specific method in a case like this, as we shall see presently.

"The last of the medicines which we shall notice, that might be given in this case, are those belonging to the class of alteratives; if, indeed, this can be called a class; which is really little better than a receptacle for all those remedies that cannot be forced into any other class, and to which the pride of fancied rationalism is unwilling to give their true name—*specifics*. In the present case, *Hyd. c. cretâ* would probably be given for the ostensible purpose of correcting or altering the secretions. But a very little reflection will show us that this intention is at least an exceedingly vague one; for the intestinal canal is suscep-

tible of hundreds of distinct kinds of action, and hundreds of medicinal agents are capable of producing each its own peculiar action; it is, therefore, a very easy matter to alter the action in any case, but as there are so many different kinds of morbid states, and different kinds of medicinal action, and only one kind of healthy action, how are we to know that the alteration will be precisely that suited to the case, and calculated to restore health, and not quite unsuited to it, and therefore an alteration for the worse?

"It is certainly a fair question to ask the prescriber of any of these medicines, Do you know the action of this medicine on the healthy body, and if so, have you any law which assures you that that action is such as will counteract the morbid action in this case? He would be compelled to answer 'No, I never studied its action on the healthy body, and the knowledge of it would be of little use to me, as I do not know any law or principle that expresses the relation between the action of a medicine on the healthy body, and its specific effects in disease; my only reason for giving it in this case, is simply that I know from experience that it has been useful in similar cases.' In this instance, likewise, therefore, the treatment is empirical.

"Thus, in the treatment of the case before us, the design, as we have seen, is perfectly rational, but in the execution of it, the *soi-disant* rational practitioner displays the greatest empiricism, and in general goes through a mere routine of remedies, till at last he either stumbles by chance on the Homœopathic remedy, or nature conducts the case to a termination in spontaneous recovery, or marasmus and death.

"The Homœopathic method of treatment differs widely from the foregoing modes, and is conducted on far more scientific and rational principles. The case before us is looked upon as a special affection of a portion of the

intestinal canal, the ultimate pathological nature of which our knowledge does not enable us to determine, but which we know we could cure if we could find a medicine capable of producing, in a healthy subject, a precisely similar pathological state. Now, to select among a great variety of medicinal substances whose effects on the healthy body have been ascertained by experiment, and accurately registered—the only *Materia Medica* properly so-called—requires precisely the same amount of diagnostic and pathological skill as to form an accurate idea of the seat and nature of the disease itself.

"Without, therefore, any conjectures or *a priori* speculations about the virtues of medicines, the Homœopathic practitioner proceeds to search, among those medicines whose effects have been *ascertained by experiment on the healthy body*, for the medicine capable of producing an affection the most nearly resembling the case under consideration.

"The case, as indicated by the first group of symptoms, would seem to be met by a great number of medicines, such as, for example, *mercury, chamomilla, belladonna, arsenic, sulphur, colocynth, veratrum, &c.* *Mercury*, especially, produces, in a marked degree, diarrhœa with cholic, tenesmus, and all the other symptoms in the group; but neither it nor any of the others produce stools of a *black** color so characteristically as *arsenic*, which produces also all the other symptoms of the group.

"In the second group of symptoms, the state of the tongue in this case is little characteristic. The dry, cracked, and foul state of the lips is of more value as a symptom, and is produced by a good many medicines, such as *arnica, bryonia, mercury, veratrum, &c.*; but some of these do not suit the primary

* Hahnemann's *Chronische Krankheiten*, 2d edit. art. *Arsenic Symptome* 585 & 586.

symptoms, and none have this symptom more characteristically than *arsenic*.*

"The pale and puffed face is also to be found as an effect of many medicines, but of scarcely any so marked as *arsenic*.†

"In the third group, the want of appetite is a symptom of no value; but the thirst is evidently a sympathetic symptom, as there is no particular heat of skin, or sweating, or other cause to account for it, and is, therefore, to a certain extent, characteristic of the primary affection. In respect to this symptom, no medicine is more suitable than *arsenic*.‡

"The fourth group of symptoms is suited by several medicines, for example, *belladonna*, *hyoscyamus*, *opium*, *stramonium*, *digitalis*, *nux vomica*, *arsenic*, &c. Of these, *belladonna* certainly suits, in this instance, better than *arsenic*; but as they are merely sympathetic symptoms, and the primary and other symptoms are so much better met by *arsenic*, it is to be preferred here also.

The other symptoms are of little value, except that the weakness was greater than might have been expected from the duration of the disease; it is, therefore, to a certain extent, characteristic, and, in this respect, no medicine is so suitable as *arsenic*.§

Arsenic, therefore, corresponding perfectly in all the essential symptoms, is obviously a medicine completely Homœopathic in this case, and, if the principle be correct, must certainly be the specific remedy. Accordingly, a dose of the 12th dilution (quadrillionth of a grain) was prescribed to be dissolved in a tea-cupful of water, and a teaspoonful taken twice a-day. The result was, that in a few days, without the use of any other means, the patient was perfectly free from all complaint."

* Hahnemann's *Chronische Krankheiten*, 2d edit. art. *Arsenik Symptome*, 289 to 297.

† *Ibid.* *Symptome*, 263 to 274.

‡ *Ibid.* *Symptome*, 372 to 385.

§ Hahnemann, *loc. cit.* *Symptome*, 934.

CASES OF PRACTICE,

BY

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LONDON.

EPILEPSY.

Several cases of *epilepsy* have presented themselves to my notice, and have been permanently benefitted by the Homœopathic remedies administered. I will first advert to the case of a young lady in whom epileptic fits had occurred for about nine years, latterly every eighth or tenth day, though, at first, only every month. In the interval between the attacks, there was great excitement of the nervous system on exertion, whether mental or bodily, with frequent headache.

During the first two months of the treatment no improvement was perceptible. Then the attacks occurred only every three weeks. After the fourth month there was an interval of three months between the attacks. Six months then elapsed without any fit; and it is now more than twelve months since the last paroxysm occurred. It may be supposed that the disease is arrested, as the nervous system has become much less irritable and the general health is greatly improved; the bowels, which never before acted without medicine, now relieve themselves naturally.

The remedies I employed in this case were *Belladonna* and *Agaricus Muscarius*; the patient is now taking *Hep. Sulph.* for the relief of hepatic derangement.

I have now a young gentleman, aged eighteen, under my care, for the treatment of this distressing malady. When first consulted about three years ago, the fits occurred regularly every twenty-eighth day.

Under the influence of *Silicea* they immediately ceased for three months ; no fit having taken place until the youth imprudently received several electric shocks, which produced a slight return of the malady on the following morning. The patient, however, continued the medicine ; but had another fit three months afterwards, and another in six weeks from that time ; after which he continued free from any attack for nearly two years. Contrary to my wish he left off taking any medicine, and paid little regard to his health. The fits returned three or four times in rapid succession, but were arrested by *Agaricus Muscarius* and *Argentum* ; and the youth has been more than four months without any attack ; by perseverance I have little doubt of effecting a permanent cure.

SPASMODIC CROUP.

I was called about a year ago to a very severe case of *spasmodic* croup. The patient was a young gentleman, aged twelve, of spare habit, and nervous temperament. The spasm was several times so severe that the face became of a leaden hue, and the pulse was not perceptible.

The attack was conquered by *Aconitum*, *Hyoscyamus*, and *Belladonna*, but returned with the same severity on the following night, and was again checked by the same means.

The parents of the patient, while travelling with him on the continent, were alarmed by a return of the disease with its former violence, when far removed from medical aid. Fortunately I had furnished them with medicines, and directions as to the employment of them, in case of a sudden attack, and the disease was again removed by the means previously used. It is to be hoped that as the patient grows older, the tendency to this alarming malady will be overcome.

HOARSENESS.

Hoarseness, whether arising from inflammatory action in the mucous membrane lining the larynx, or from loss of tone in the muscles which regulate the voice, is, in a most marked degree, under the control of Homœopathic remedies. I was sent for late one evening to visit an eminent barrister, whom I found affected with hoarseness resulting from a cold ; and which usually lasted many days. It was of the utmost importance to him, at this time, that he should speedily recover his voice, as he was engaged to plead, two days afterwards, in an important trial.

I gave him, that evening, *Bryonia*, and on the following day I found him much better ; but as some hoarseness remained I administered *Causticum*. The next intelligence I had of my patient was that he made a long and eloquent speech, and had gained his cause.

Many of our first-rate singers at the opera are well aware of the speedy influence of Homœopathy in hoarseness ; and I have myself met with numerous instances in which an appropriate Homœopathic remedy has prevented the disappointment which a deterioration of the vocal power is sure to occasion.

NERVOUS DEAFNESS.

Nervous deafness is often under the control of Homœopathy. Many cases are, however, but temporarily cured, owing perhaps to the neglect of professional assistance. I found *Phosphorus* and *Aurum* of the greatest service, in a case, in which a sensation as of a kettle boiling, was very distressing, and the hearing extremely imperfect, especially in damp weather. The power of hearing was perfectly restored, except in a rainy season, when it was somewhat impeded.

T H E

HOMŒOPATHIC EXAMINER.

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HOMŒOPATHIC POSOLOGY,

BY

DR. LOBETHAL.

TO THE EDITOR OF THE EXAMINER :

Deeming it a duty each physician owes Homœopathia, as soon as he has become convinced of its superiority to the ordinary practice, to do all in his power towards its perfection, I have sent you this translation of one of the experienced practitioners of the science in Europe. I do not pretend to have formed any firm opinion upon the subject. It is one which has provoked some considerable discussion in Europe, as you well know, and must sooner or later be discussed here. I do not know in what manner I can better aid the good cause, than by promising you more from other sources, on the same subject, if you think best to open your Journal to the discussion.

It is taken from *Revue Critique et rétrospective de la Matière Médicale Spécifique*. Vol. troisième, 1841.

I am, &c.,

HENRY G. DUNNEL.

The determination of the dose is an important point, that has given rise to prolonged discussions. The formularies of the old school, it is true, pass over the difficulties which present themselves equally lightly as our Homœopathic Manuals ; but the manner of proceeding of Allopathia, we observe, is more rational than ours : it places, in effect, the extreme limits, as, for instance, two to fifteen grains—two to ten grains, &c., leaving to the physician the liberty of choosing the dose, according to the susceptibility of his subject. Homœopathia is far from thus acting.

For a long time it foolishly imagined it was sufficient that the physician made choice of the specific medicine, and that it would cure *tuto et cito*, equally when administered in the feeblest or strongest dose, by raising a conflict with the disease, or by provoking a homogeneous reaction of the curative vital force ; with this sole difference, that the cure was obtained more *jucunde*, if recourse were had to the feeble dose, whilst the stronger excited at first the Homœopathic exacerbations. We cannot deny that these ideas appear to us to be contrary to all the laws of organic reaction, and to be wanting in any rational foundation.

The partisans of the normal doses say, that it is peculiarly the advantage of a specific means to make its effects felt, even in the feeblest dose ; but this assertion is opposed by the daily experience of Homœopathic and Allopathic physicians, who are convinced of the difference of susceptibility of individuals in

good health, and still more in a diseased state ; a difference arising from temperament, age, sex, idiosyncrasy, habits, &c.

In the same manner as vomits, purges, sudorifics, &c., administered in the same dose, do not affect all patients in the same degree, even so we cannot employ in every case one sole, and same dose, of a specific medicine.

The reaction of our organism against external impressions, depends so much both in a healthy or diseased condition, upon a great number of circumstances, that sometimes the lightest influences produce upon us the most important effects ; whilst at other times, the most energetic influences glide over us without leaving a trace.

If this be so, as experience has proved, and if in practice we act not only with reference to what we do, but also, and above all, with reference to the end we wish to obtain, we are convinced that the determination of the dose is a question of great importance to the Homœopathic physician.

God be praised, the times are passed when we adhere without examination to the prescriptions of Hahnemann, and when we administered the 30th dilution in every case, without any regard either to the species of the medicine, or the individuality of the patient. The remembrance of that epoch has left among the Allopathic partisans of improvement, such an unfavorable impression, that even to this day they cannot overcome their prepossessions against the Homœopathic method.

Let us leave Hahnemann, then, to persist in his ideas of the normal doses ; let him talk in his fifth volume of his last edition of his *Chronic Maladies*, of dilutions still higher for all the medicines ; we will leave him to think, with some of his disciples, that the trituration is able to elevate to infinity the energy of a substance, and that the 50th dynamization may still be too strong.

As for us, we will follow the road of sound reason, and not neglect the lessons of experience.

Some have for a long time feared to administer strong doses of Homœopathic medicine, under the persuasion that dynamized medicines provoked an exacerbation of the morbid state, and it is this fear above all which has caused one party of Homœopathic physicians to remain faithful to little doses.

The power of causing a Homœopathic exacerbation is founded upon the specific nature of the medicines ; but another question arises ; is it possible to determine those exacerbations under all circumstances, by the doses called infinitesimal, and do all the morbid symptoms which are classed in the category of exacerbations, in reality appertain thereto ?

The idea of greatness or littleness is but relative : we cannot say in a general manner, that some drops of the mother tincture of a certain medicine will be a strong dose, nor yet, perhaps, that the 24th or 30th dynamization of every medicine should be regarded as a feeble dose. *The dose of each medicine should be strong enough to provoke the necessary reaction of the organism, and, provided we are careful not to administer a too heavy one, agreeable to take, and without danger, we should always give a sufficient one.*

Naturally the reaction of the organism cannot be determined but by very different doses of diverse substances, so various in their physical properties ; and whilst the 30th dynamization of Arsenic suffices to produce the desired effect, it may require some drops of the mother tincture of Parsley to attain our point.

Between the great, and the too great, there is this difference : whilst the sufficient dose secures a peaceable reaction, the excessive dose occasions accidents too violent, and sometimes, even dangerous.

Homœopathic remedies generally administered in feeble doses, provoke the necessary

reaction of the organism much easier than the medicines chosen according to the principles of the old school, and provoke in the feeblest proportional quantity the necessary reaction of the affected systems or organs.

Whilst the Allopathist, with his strong mixtures, the constituent principles of which mutually combat each other, depends upon a multitude of medicines, the Homœopathic physician plays a perilous game, if he excite beyond measure the vital forces directly provoked. It is sufficient in many cases, as experience has proved, to use a feeble dose, and often even a dose infinitely feeble; again the low dilutions sometimes produce the primitive effects too energetically.

In the same manner, as the sole plausible mode of reasoning, we are able to give the difference observed in the reciprocal reaction of chemical agents. It is experience alone proves it to us more or less sensitively.

And in like manner, as we are unable to show how this faculty of reaction is found to be the same in all inorganic or in all organic bodies, that are capable of being submitted to chemical analysis, still less are we willing to admit, as founded upon a rational or stable principle, the necessity of employing exclusively doses large or small.

I am decidedly convinced, that in order to apply the Homœopathic treatment with success, the physician should take cognizance of the whole scale at his disposal, from the actual dose of the old school, up to the highest dilutions of which any medicine is susceptible.

The greatness or littleness of a dose depends upon the physical properties of the article and its divisibility; that is to say, that its medicinal virtue be not enfeebled by the division of its atoms, farther than necessary to render it fit to be assimilated with the human organism; and consequently it depends upon the absolute virtue of the medicinal substance; it depends again upon the susceptibility of the

diseased organ, or the system for its specific irritation, also upon peculiar circumstances, such as the age, sex, temperament, habits, idiosyncrasies, &c., of the patient.

My intention has been solely to give certain indications, which have served me in practice to determine the dose with greater facility, and I hope no other motive may be imputed to me, than the desire to enlighten myself by the collision which my ideas will be likely to meet with.

We dynamize a medicine for the purpose of rendering it more proper for its destined use; the poisonous and corrosive substances for the purpose of taking away by degrees their chemical qualities, deleterious or hurtful to the human organism, and to develop its virtual properties; others, more especially plants, by separating their gross and useless parts, and, at the same time, rendering their essential forces more active; a multitude of substances, again, which in their primitive state seem inert, are thus enabled to exhibit their latent virtues, by the rupture of their cohesive property.

Thus manipulation is sometimes a necessary corrective of our medicines, and sometimes an electro-magnetic operation, according to the nature of the medicine, and its reaction on the human organism.

We cannot say in a positive manner why such a medicine can be carried to such a degree of dynamization, and there show itself efficacious. We are therefore reduced to an hypothesis.

The metals, and easily oxydised earths, such as Arsenic, Copper, Lead, Zinc, Iron, Barytes, Talcoose earth, Calcaria, &c., are generally susceptible of a high dynamization. The perfect metals, on the contrary, Gold, Silver, Platina,* have not in general a certain effica-

* Platina has rendered me great and instant service, above all in hemorrhage of the uterus at the sixth and in the twelfth dynamization. I have also

cy, except in lower dynamizations, up to the second and third trituration only. Mercury, especially Mercurius Corrosivus is incontestably efficacious in the fifteenth power; nevertheless, in most cases, where it is specific, it is necessary to administer it in one of the first triturations.

Among the acids, the Muriatic and Sulphuric* render little service when dynamized; whilst the Nitric acid is, again, in the thirtieth attenuation, an excellent medicine in a great number of diseases.

The Phosphoric acid shows itself less efficacious in a dynamized form, and the Prussic acid produces scarcely any effect. Among plants there are the Narcotics, and the acrid Narcotics, which are again the most energetic in the highest attenuations; although I do not partake of the fantastic opinions of Comfort (Vienna, 1839) upon the Homœopathic treatment. I regard as true, this remark, that those medicines which show themselves efficacious in a high potency, are for the major part those means to which the old school attribute a direct efficacy upon the nervous system, and in which, chemistry has more or less proved the existence of an Alcaloid. In this number I class Aconite, Belladonna, Bryonia, Capsicum, Cocculus, Conium, Nux vomica, Rhus toxicodendron, &c.

The most of the ætherial oily medicines lose all their efficacy by a high attenuation; but each according to its own natural laws.

It is, moreover, a fact that the elementary

seen Gold very efficacious at the twelfth, in nervous erethism, and congestions towards the head. Experience will not, therefore, permit me to admit this division of the metals into two classes.—*Rummel*.

* I have found Sulphuric acid efficacious in the sixth dynamization, in those pains which exacerbate themselves, then suddenly disappear, and also in a great number of affections accompanied with similar pains.

principles of mineral waters, and above all the simple-non-metallic-bodies, known in chemistry, and so generally diffused through the three kingdoms, yield better than all the others, submitted to an efficacious dynamization, that is to say, which develop more and more their medicinal virtues, such, for example, as Sulph., the two species of Carbon, Graphites, and Lycopodium. We should likewise observe these are precisely the substances which have an affinity for Oxygen, whilst those which readily combine with Hydrogen, as Chlorine and its acid, lose their efficacy in a high dynamization, or at least in a great measure.

That on one side the volatile substances, as Camphor, cannot be dynamized, whilst on the other there may be dynamized substances very efficacious in strong doses, such as most of the mineral waters, is what we cannot be permitted to doubt.

If it be impossible to speak with precision upon the absolute efficacy of the means employed by Homœopathia, because we are unable to follow the laws of organic production and existence into their most mysterious laboratories, where we never shall penetrate, it is not the same relative to the danger in a certain case of disease, after doses more or less strong, seeing that we have for guides, besides an impartial experience, the invariable laws of the sound, and diseased body.

We may establish it as a principle, that *the administration of large or small doses is in inverse proportion to the richness in nerves of the individual organism, and the species of diseased organ; that is to say, the more the sentient sphere of the organism, in a given case, shows itself predominant, the more the dose of the indicated specific medicine should be feeble, and that the more the individual organism, or, in a local affection, the diseased organ, is poor in nerves, the more the doses should be large.*

This will open a vast field to discussion, if we wish to apply the principle to every case.

We are satisfied to have established, that Homœopathic means have convinced us in a manner the most irrefutable, that all the medicines operate immediately through the nervous system. The more then the individual organism shows itself sensitive to nervous impression, under the aspect of its vital activity, the more promptly must the medicines which are indirect conformity with the existing affection necessarily act upon it.

'Tis this which proves how true it is, that the Homœopathic means, in order to prove salutary, require a certain mobility of the organic functions of life, showing themselves much less efficacious, and even producing no effect, in a dilution slightly extended, in those material diseases, where the vital forces are totally or partially repressed and disturbed in their dynamic manifestation.

Reciprocally we see in those cases where the nervous system is super-exalted at the expense of the other systems, that it is almost impossible to find a dynamization which responds to the great susceptibility of the nerves.

I need only mention here those forms of Hysteria, which, after having endured for years, reproduce themselves with the character of an hyperthesia of all the nerves, and where we obtain so little results from every medicine, even of the highest attenuations that contain the constituent parts of the medicine. If I should be willing to have recourse to olfaction, it would be in such a case as this ; for we may regard it as the first step towards the imponderables, which, like magnetism, show themselves so efficacious against similar affections.

We see in persons who take Homœopathic medicine for the first time, how much the nervous system is influenced by the effect of the smallest dose.

If the remedy be well chosen, it produces ordinarily the most astonishing results, even where the patient had taken but a short time

before, the most energetic and diverse medicines. This phenomenon arises solely from the new impression of an entirely new medication, a new exterior excitation, acting always upon the organism according to the laws of its pathology.

But the prompt susceptibility for the medicinal atoms of Homœopathia loses itself the more or less rapidly, as the physician shall judge proper to repeat his doses ; for according to the law of the nervous system, a frequent excitation becomes a habit, and finally an obtuseness.

In general, the younger the organism, the more active the temperament ; the less the subject has suffered from disease, the more the perception of external influences is sound and pure ; and the easier will the Homœopathic physician attain his object by the small, and the very small doses. Also, the first diseases of infancy, the numerous accidents of the physical development, and during the years of puberty of both sexes, are cured by the feeblest doses.

In the old man fallen into childhood, or the young man exhausted with pleasure, the high dilutions, even of the most energetic medicines, produce at the most but a momentary influence.

The more the reproductive draws upon the other agents of life, the more there exists functional trouble or disorganizations, the less can the small doses render service.

We observe this difference very strikingly in the three diseases especially, against which the old school already know the specifics. It is incontestable that Sulphur, and especially Mercury and Cinchona, act often with much efficacy in dilutions tolerably high, against a great many diseases ; notwithstanding which, it is precisely these diseases against which these medicines are recognized as specifics, which often gives us the greatest difficulties in practice.

The itch demands doses of Sulphur, more or less material ; syphilitic affections, where it is necessary to administer Mercury, the patient inattentive to diet, require the use of the first trituration or less ; and those intermittent fevers which require to be treated with Cinchona, require to be combatted with doses of Quinine or of Cinchona relatively stronger.

Does not this prove that the importance of the Homœopathic principle resides not in the employment of feeble doses ? since, if we are able to cure by the high dilutions the troubles of the sensitive or irritable life, we are not equally happy against those of the reproductive faculty.

Let us now proceed to certain details.

The more the entire organism participates in the disease of an organ, the more our means, even in the lightest doses, act with promptitude.

But here presents a double case. In acute diseases, namely in fevers, the exanthems, and the parenchymatous inflammations, all the vital forces seem in such excessive activity, that it is with difficulty any feeble exterior influence modifies it ; and on the other hand, they are able more easily to surmount a shock, even relatively violent. Most Homœopathic physicians think the most appropriate mode of proceeding in these cases is to use the low dilutions, and even the pure tincture.

The more a partial erethism predominates, instead of a proportional excitement of all the vital forces, and the more a great susceptibility of the nervous system appears to be the proximate cause of the disease, the easier we shall succeed with the small doses. It is this which takes place in superficial inflammations, in light fevers, often ataxic, of irritable persons, and in many cases of nervous versatile fevers.

It is the reverse in the torpor produced by a predominant virus, or in great derangement of activity in the most important vital

functions that the large doses alone are efficacious ; as for example, in the versatile fever degenerating into stupid typhus, in the stupid typhus itself, in the putrid or petechial typhus, &c., in gangrenous inflammation of the throat, in contagious elephantiasis, in senile gangrene.

Although we have heretofore said that infancy requires, on account of its great susceptibility to the medicines, to be treated with the most feeble doses, it has been confirmed by experience that in many cases nevertheless, it is necessary to have recourse to stronger doses. It is so in noma which properly appertains to the diseases we are about to indicate, and demands, if it be cured, strong doses of Mercurius, Arsenic and Muriatic Acid ; gastromalacia requires the use of Arsenic, Kreosote, Lachesis in the low dynamizations, and the most malignant degenerations of scrofula and rickets, as well as caries in general of all the hollow bones, the spina ventosa, require strong doses of the suitable medicines.

I do not deny having often obtained in these last forms of disease, important services from Arsenic, Calcaria, Baryt. carb., Baryt. mur., Sulph., Lycopod. and Silic in high dilutions ; but I must likewise acknowledge that these means have often been inefficacious, especially where there existed profound destruction of the bone. The nearer the infant is to death, the more it has fallen into atrophy, the more it has the air of complete misery, the more one medicine, of which I cannot speak but with terms of the greatest commendation, renders service. I mean the Kali hydriod.

We obtain nothing under the form of dilution or trituration, but administered in a strong dose, it not only produces no unpleasant effect upon the organism of the infant, but it is the only means of saving its life.

I have been astonished with the effects which I have obtained from it, after having employed other medicines for years, by causing

them to take ten and sometimes twenty grains in solution in water.

There is not in the world any other means, as has been remarked by those who have lately praised it, equally capable of promptly appeasing the most horrible pains, although Wallace and others add to it pure Iodine to augment its effects. I have not satisfied myself by trials of it, from a fear that it might become injurious from its too great energy.

It is only in consequence of its chemical combination with hydrogen, that Iodine has become a substance, which easily assimilates itself with the human organism, and which makes it successful when administered in strong doses. Experience has convinced me that it is always efficacious.

Among the diseases of infancy likewise requiring strong doses is the *Crusta serpinginosa*, (Sulphur. Lycop. Graphites, 3, 2 and 1st trituration.) *Tenia*, (especially Graphites 1, and at the same time the application upon the head of a bladder and frictions with oil.)

Helminthiasis, rarely painful if the disease is not produced by the oxyurides or the ascarides, (and in this case we give China.)

In chronic hydrocephalus the high dilutions often do not render any service, and there is no other way but to resort to *Helleborus*, *Arnica*, *Opium*, *Mercurius*, in the first dilutions. The malignant apthæ ordinarily demand the use of strong doses of *Mercurius*, (I mean by this the triturations 1, 2, 3) and the Muriatic acid.

The membranaceous angina, in its most dangerous forms is cured by *Hepar*. 1, and sometimes even the pure tincture, at a dose of several drops.

In a case of desperate malignant Diphtherite, Laches. two to fifteen every ten minutes, and less frequently when relief was experienced, together with ice-cold cataplasm about the neck, saved an infant of about two years of age.

At the age of puberty, we know that the young are very subject to congestions towards the organs of the head, and those of the respiration, as *phthisis tuberculosa* in its different degrees. This epoch is the source of a multitude of diseases in females. The too great abundance of blood, and the sensibility of the nervous system, often produces in a young girl arrived at this age, derangements of circulation, which manifest themselves by pseudo-cardialgic affections, and other serious accidents. Sometimes a sedentary life, a disordered imagination, an irregularity of conduct produces hysteria, or else an anterior sickly state, and a cachectic disposition induces chlorosis. I will not encounter again very severe opposition among Homœopathic physicians by asserting that an acute pneumonia in a young man, requires one bleeding before the use of Homœopathic means, in the most pressing cases, and in this case it will not be the highest but the lowest dynamizations which prove themselves the most efficacious. It is what experience has proved to me for *Aconite*, *Bryonia*, *Belladonna*, *Senega*, *Cannabis*, *Rhus*, *Sambucus*, &c. The more the inflammation is removed from the pure synochal character, or the more the pain is superficial, the less the organism is affected, the more certainly the light doses render service.

In commencing tubercular phthisis we should in general prefer the lightest doses of *Belladonna*, *Kali Carb.*, *Lycopod.*, *Nitrum*, *Phosphor*, &c., and administer them in the 30th attenuation. If the tubercles have made more progress, if they have commenced suppurating there is a choice of a great number of medicines equally recommended, but we will find them of very little efficacy.

In this period, the spitting of blood, and often the vomiting of blood, will be appeased much more easily and more surely by the small doses of *Aconite*, *Arnica*, *Carbo. v.*, &c., than by the large. The other medicines, *Silicia*,

Mer., Carb. v., Hepar Sulph., &c., besides those before named, render but precarious services at whatever doses we employ them.

One sole means, (and its analogy with the glandular and lymphatic system should lead us to administer it in such cases) Iodine, appears to me to have, in a certain number of cases arrested a death which seemed inevitable, in persons affected with an erethism of the vessels, dyspnœa, tuberculous expectoration, and the commencement of colliquation, and this, too, in the 30th dynamization; the 3d and the 6th act with almost too much energy. If we compare the results of the employment of Iodine in this disease, and the scrofulous caries, we will find what I have said perfectly justified. In scrofulous caries, it is not only the re-productive organs, but also the two other agents of life, which are implicated in the disease, whilst in tuberculous phthisis, if the reproductive sphere suffer a very diseased metamorphosis, the sensibility is strongly super-excited; it is this which in a phthisical subject inspires the strangest fantasies. We possess no remedy against colliquative results. Phosphorus and Arsenic in high dynamizations act solely as palliatives.

As to those diseases which attack females at the period of development, and also even at all the periods of the evolution of the human life, we cannot too strongly recommend to the physician very great prudence in his prescription. Never is the plastic and reproductive activity more energetic than in the different degrees of the formation of our body. Nature is often so sagacious in removing, at that time, those obstacles which seem to invincibly oppose themselves to its free development, and its salutary force extends so far, as to act not only upon that sphere of life immediately attacked, as upon the teeth in the period of dentition, upon the genital parts in that of puberty; but also upon each part affected, however distant it may be.

But lest we may not wander too far from our subject, it will suffice to recollect that no part of a prudent expectant method suits better than in most of the forms of development of females arrived at the age of puberty.

We have often witnessed a bleeding, a foot bath, an emmenagogue, a dose of iron, improperly prescribed, exacerbate a state, which, abandoned to itself would never have arrived at such severity. It is true, the Homœopathic physician has not to fear his medicines will be essentially injurious to his patients, and he enjoys the advantage of having at his disposal the means of relieving in much less time, the inconveniences of this period; nevertheless, we also recommend him to confine himself within strict limits, and not to make use of medicines unless dynamized as far as possible, and administered only at long intervals. By means of these precautions it will be an easy thing for him to cure happily, sometimes with Aconite, Belladonna, Lycopodium, Calcaria c., Sepia, sometimes by Pulsatilla, Sulphur, &c., the different symptoms of amenorrhœa, and menostasis, in either the erethematous or torpid diathesis, and whether there may be congestions towards the head, the chest, or cramps in the belly, with certain indications of Chlorosis, and however stubborn in other respects the case may be.

It is only in those cases where the activity of nature has been enfeebled by anterior diseases, which have rendered the sanguification vicious, and cannot be renewed by any exterior excitation to a suitable degree, where the loss of the crur of the blood has given rise to a dangerous degree of chlorosis, and where the pallor of the young female, and the indications of the activity of the heart, are accompanied with symptoms of great feebleness and œdema of the feet; it is only in this case, I say, where it is necessary, without waiting at all for Arsenic, Sepia, Calcaria, nor for a strengthening and nourishing regimen to have

prompt recourse to *Ferrum*, which alone can save the patient. That this medicine acts favorably, against chlorosis, because it is Homœopathic, is altogether indifferent; it is sufficient that it is the sole specific. I think, also, that it is not a Homœopathic means, since it is not in direct conformity or Homœopathic, except in the erethematic form of the diseases of puberty, and it seems to act with such great efficacy, solely in contributing to obviate the material absence of the iron of the blood.* In these cases we should use Iron, perhaps in a bath from $\frac{3}{4}$ to $\frac{3}{8}$ of globules for a bath, or in the form of *Tinct. Ferri. Acet. Æther.* in doses gradually increased, from 10—15 to 20 drops, three times a day. I remember having treated many patients of this character, where, after having used Homœopathic means without success, Iron administered alone at an opportune period has saved the patient, and I regard it as a duty to add, that this medicine in dynamized doses, has absolutely remained without any effect.

Nature having come victoriously at length out of this so often painful struggle, and the female arrived at a marriageable condition, she finds herself exposed, besides those common to both sexes, to derangements of menstruation, as much in regard to quantity as quality, and to various affections which follow in the suite of marriage, and which are much more frequent in the female than in the male.

* Whence, then, comes this material absence of the blood, and what avails this artificial compensation, if at the same time, the cause is not made to cease?

I think, therefore, that iron acts with such activity but in restoring the functions of the heart to their normal condition; and, that it contributes to reform the sanguification. I have, in fact, seen other medicines which fulfilled the same indications, showing themselves equally useful in the true chlorosis, although they did not contain any iron.—*Gross.*

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In almost all these affections we find a great susceptibility to medicine. Also the Homœopathic physician combats these cases with most success; however poorly his arsenal may be furnished, relatively speaking, to the other methods, all the medicines indicated here, as *Nux*, *Pulsatilla*, *Calcarea*, *Sepia*, *Cocculus*, *Graphites*, *Lycopodium*, &c., act in the highest dynamizations we are acquainted with, and at the longest intervals, and regulate in a durable manner the most considerable anomalies of menstruation. Let no one imagine that a stronger dose than is necessary, or repeated more frequently the exigency of the state of the patient requires, will produce the same effect. Experience has proved, on the contrary, that by such means we are exposed, if not to the entire loss of our object, at least to a retardation of the cure until such times as the physician, perceiving his error, leaves an interval of repose to his patient by means of inoffensive medicines—or, until the patient, at length loosing all patience, refuses to continue the treatment, and finds herself cured soon after, to the astonishment of the physician.

We firmly believe, that we are apt to abuse Homœopathic means. The more the activity of the nervous system predominates, or is implicated in a given case, the easier it is to fall into this fault. The abuse of the medicines has the most serious consequences in the pure Neuroses, the Algies, and above all in hysteric affections. The primary effect in the case is the exacerbation of the evil, and the inutility of the medicines which are sequently administered, under whatever form they may be. All those which are given, at length make the condition of things worse; their effects are easily to be perceived, but there comes no salutary reaction.

If on one side the physician finds himself compelled by the continual sufferings of the patient to make trial of another medicine, he should not, on the other hand, lose sight of

the adverse results, more especially in chronic diseases, from frequent change of medicines, and closing the ears to the complaints of the patient; it will become him better, instead of pouring oil upon the fire by the use of antidotes, to counsel a discontinuance of the regimen, and all medication for some time. He will never have occasion to regret so doing.

In most of the inconveniencies of pregnancy, there is need of only a very light medical effect of the specific, in order to remove the most severe forms, if they can perchance be cured at all. It is thus, that the vomitings cease certainly by the use of the feeblest doses of *Ipecacuanha*, *Nux*, *Natr. Mur.*, *Sulph.*, when they are provoked by the sympathetic irritation of the nerves of the stomach, whilst it is nearly impossible to relieve them, when the weight of the uterus continues them by mechanical pressure upon the nerves.

It is incontrovertible, that the pains of the teeth in pregnant women, the cramps of the stomach, heartburn, palpitations of the heart, give way to a simple olfaction of the high dilutions, although it seems more prudent to introduce them into the stomach in the highest dynamizations.

We will not speak of the other diseases appertaining to this period, nor of the means which are beneficial to hasten delivery, excepting that it must depend, whether we use the high or low attenuations, upon the temperament.

We will only remark, that there is nothing more efficacious in provoking the pains of child-birth than the *Secale Cornutum*, which, under all circumstances, should be used in the first or the second attenuation,* or even not

* I give in this case the 6th attenuation, and I have always received service from it; a tenth of a grain produces nothing more, as I have often perceived. I am able to assert that the 30th dynamization has also shown itself efficacious; I will not solely re-

attenuated, in a dose of a quarter or half grain often repeated. We will pass on to those medicines used during the confinement, when any interruption to the regular progression occurs.

If we consider labor a physiological act of the organic activity of the female, those accidents which sometimes present themselves will appear to be acute, independent, and solely appertaining to child-bed. Wherefore, the puerperal fever, like most other acute diseases, ordinarily requires strong doses of *Aconite*, *Bryonia*, *Belladonna*, when the high dilutions do not immediately relieve the pains, and if, in some cases, without or with the use of leeches to the lower belly, to which the stubborn local inflammation has sometimes driven us to have recourse, we have not been able to prevent the exudation between the peritoneum and the abdominal integuments, or between the folds of the peritoneum itself; but we have been obliged to renounce the administration of *Sulphur*, *Mercurius*, &c. The oil of *Turpentine* given by spoonfuls, as prescribed by *Hauk*, of *Berlin* has often seemed to us a surer remedy.

We have several times cured the phlegmasia alba dolens by means of *Aconite*, *Lycopodium*; but we have succeeded better with the high dynamizations than with the low: we give this medicine oftenest in solution, for the purpose of being able to repeat it oftener.

When the female has fulfilled her vocation upon the earth in giving birth to the infant, when she has entered upon the eighth lustration,* then commences in her the process of

commend the high dilutions, for I am convinced, as is the author, that the dose always depends upon circumstances. I wish merely to make this remark, that *Secale Cornutum* has rendered me the same service in high or low dynamizations, in those cases where the pains of labor were defective.—*Gross*.

* Fortieth year.

involution, and with the particular characters of the female, disappear in her all the physical differences which distinguish her from man. The aged woman and the aged man resemble each other, the same as the young boy and girl previous to puberty. The years of involution are, as we all know, the epoch of a multitude of diseases for a great many females, and these diseases find a soil more favorable to their development, if in youth the disposition to different physiological perturbations has been greater. These diseases are so varied that we cannot easily establish any precise rules relative to the doses to be employed ; but we may nevertheless affirm, that in all the pathological states of this period of life, generally in the induration of the glands, the anomalies of menstruation, spasmodic affections, as cramps of the stomach, globus hystericus, hysteric-tonic spasms, in hæmoptysis and most of the inconveniences which appertain to this period, the highest Homœopathic doses, or the middling are ordinarily most efficacious.

We know that at the age when the vegetative life has reached its culminating point, the vena porta is often a door through which enters a multitude of ills. The liver, the spleen, and the digestive canal, with the blood vessels appertaining to these organs, and the extremities of which form, *stricte sic dicte*, the hemorrhoidal vessels, embrace the focus of the affections peculiar to this age.

Where is the physician who knows not by experience the numerous perturbations of assimilation, which so often arise from passions of all kinds, above all from care, chagrin, or else from ambition, from envy, the excesses of the table, or of love, extreme physical or mental efforts, as obstructions of the vena porta system, inflammations and indurations of the liver, of the spleen, flatulency, cramps of the stomach, hemorrhoids, hypochondriasis ?

So long as these diseases have not arrived at the degree of an organic metamorphosis, the

Homœopathic physician is in a better situation than any other to cure them. As to the determination of the dose, we may establish this as a principle, that the more the pathological state corresponds with the anomalies of dynamic vitality, and the less the disorganizations are evident, the more will the high dynamizations show themselves efficacious, and, on the contrary, the more the organic alterations have progressed, the more the indurations and the dropsies may be considerable, the more the medicines should be employed in low attenuations.

Here again we naturally must have regard to the individuality, and the mode of life of the patient ; whether he has already taken a great number of medicines ; if his nervous system reacts powerfully, &c., in order to determine the choice of a medicine more or less strong.

I have many times had occasion to treat induration of the breasts and the uterus, many of a mild character, which were evidently tending to schirrhous indurations of different organs, and I am convinced that in these diseases when they attack an organism in which the nerves play an important part, as it often happens in the female, the high dilutions of appropriate medicines, not only conduce to the same result as the strong, but, that they conduce thereto more surely, and more promptly ; this is what experience has confirmed for me, especially in regard to Belladonna.

On the contrary, I have had to treat, it is now a year since, a merchant of Astracan, a true Russian of forty years of age, hardened by travel in the midst of the steppes of Asia, and by a mode of life which those accustomed to our saloons could not endure for a month. This man had been attacked ten years previous, during a journey, with an inflammation of the liver, and, as he desired to be speedily relieved, a Russian physician to whom he ap-

plied, advised him to drink three days in succession, a glass of brandy with cannon powder. He was enabled to pursue his journey in about forty-eight hours. From that time the pains did not entirely leave him, and, although with less violence, they continued to torment him. Irregularity of excretions, hysteric complexion, anorexia, continual heaviness of head, and loss of strength, such were the principal characters of his state. From the impossibility of ceasing his journey, he was obliged to profit by the short stays he made, sometimes in one place, and then in another, to consult a physician. He suffered in this manner nine years, when a Russian friend of mine persuaded him to consult me. He had already consulted forty-two, celebrated in Europe without the slightest relief. I found an induration of the liver very extensive, especially of the right lobe, a continual sensation of heaviness and compression of the belly, bad digestion, unnatural secretions, and hypochondriacal humor. I at first prescribed Sulphur alone, afterwards alternately with Nux, in different attenuations, without effect. Murias Magnes. 30, then 12, seemed to produce a favorable change, but the Russian wanted above all to be cured promptly; and the necessity for the departure of my patient, conjoined to his impatience, tormented me excessively. The idea struck me to give at once Magn. Mur., in the strongest doses. I had the medicine prepared in a pharmacy, and prescribed R. Murias Magnes. grs. 10. Aque Distillat. ziv. M. S. D. in a bath. This solution was employed every day in a warm bath, when the salt was well dissolved the patient placed himself in the bath, and remained there half an hour. After the second, and more so after the third, we observed great relaxation; the belly inflated, and there came forth a degenerated mass, as if an abscess had been opened. I caused the baths to be discontinued for several days, until its effects seemed to wear off; then I prescribed them

again, but with less salt, and gave internally, Magn. Mur. 6, in solution.

In about two months the patient was perfectly cured, and regained the appearance of health. He departed with the recommendation to continue the use of Murias Magnes. 6. The last news I have received from him, informs me that he enjoys excellent health, and has recovered his strength.

What shall we say of those diseases, the indications of an inevitable dissolution, which occur almost always at an advanced age, dropsies, the different forms of marasmus, of those palsies which are for the most part incurable, or of which we can only, at the most, suspend the progress for a little time? We should not impute it to the imperfection of the method, or to the feebleness of art, if these show themselves rebellious against all means. It is not given to man to save himself from inevitable death. There is then no other resource here, but in palliatives, supposing circumstances require their employment.

But the nearer the creature is to his end, the less external impressions, joy or chagrin, the charms of novelty or beauty, have power over his fading heart, the less should the physician adhere to the infinitesimal doses, which require a debilitating diet.

We should have recourse to excitants more energetic, for the purpose of provoking reaction, and to hold fast that life, which is fast going out. Generous wine, good broth, and suitable medicines in strong doses, are what should be employed.

If it be simply feebleness, produced by age, we should prescribe Phosphor. and Opium, not diluted, but the first with several drops of Spts. Vin., and the second at a dose of $\frac{1}{4}$ to $\frac{1}{2}$ gr. The administration of very feeble doses procures an easy death; but that is not the duty of the physician, if he can prolong, if it were but for a minute, the life of his patient, he should rather have recourse to strong doses.

We may thus classify the diseases which demand the use of strong or feeble doses:—

Feeble Doses.

Attenuation.—30, 24, 18, 12.

DISEASES OF YOUNG INFANTS.

Icterus, Erysipelas. Bell. Rhus. Merc. Sulph.

Dentition. Acon. Cham. Calc. car.

Constipation of young infants, especially in those at the breast. Nux. Lycop. Argill. Opium.

Diarrhœa of infants at the breast. Ipecac. (always in the 2d or 3d attenuation,) Arsen. Cham. Phos. Ac. (9).

Atrophy, commencement of. Arsenic, Calcar. *Tetters, Furunculus, Crustæ Lactea.* Lycop. Sulph. Arnica, Jacea.

Scarlatina benigna, Rubeola, variola, Millia-ria. Belladonna, Aconite, Pulsatilla, Mercurius, (3).

Plethora, from congestion in puberty. Acon. Bell. Phos., &c.

Palpitation of the heart, False Aneurism, Acon. Can. Cocc. Ignat. Spigel.

Bastard Pleurisy. Bryonia. Rhus, Lycop. Mercur.

Hæmoptysis. Acon. Arn. Carb. v. Kali Carb.

Phthisis, commencement of, Lycop. Kali Carb. Nitrum, Phos. Carb. v. Natrum Mur. Iodine.

Colliquative sweats and Diarrhœa. Ars. Phos.

Hæmorrhoids. Nux, Puls. Lycop. Carb. v.

Cardialgia. Nux, Carb. Cocc. Ars. Sulph.

Phyosconia, from induration of liver, &c. Mur. Magn. Nux. Sulph. Bell. Bryon.

Constipation, habitual. Nux, Lycop. Sulphur, Cocc.

Hæmatemesis, Melæna. Nux, Carb. v. Ars.

Metrorrhagia, chronic. Sabin. Puls. Secale, Croc.

Grippe. Phos.

Diarrhœa of young infants. Phos. China.

Dysentery. Ipecac. Sublimat. Phos.

Cloasma Hepatica. Sep. Phos.

Pregnancy, inconveniences of, such as, tooth-ache, Magn. Carb. Sep.

Habitual vomiting, Head-ache, Heartburn, Constipation, varices, &c. Nux, Sulph. acid, Lycop. Natr. M. Ars.

Cracks in the nipples. Arn. Graph. Sulph.

Galactorrhœa. Bry. Bell.

Vernal Intermittent Fever. Ipecac. Nux, Natr. M. Sublimat.

Quartan Intermittent. Ars. Pulsatilla; where China is necessary it should be given in strong doses.

Neuralgias of all kinds. The more general the perturbation of the nervous system, the greater the necessity of a feeble dose. The feeblest should be used in Hysteria, Epilepsy, Prosopalgia, Nervous Sciatica, and even these seem often too strong; it is much better to have recourse to the imponderables, to electricity, to magnetism, mineral and animal at the same time, and to the imagination.

STRONG DOSES.

3RD DYNAMIZATION, 1ST TRITURATION, MOTHER TINCTURE.

Chronic Hydrocephalus. Hell. Arn. Opium.

Gastromalacia. Ars. ? Kreos. ? Aqua Oxy-
riatica.

Noma Scorbut. Merc. Ars. Muriat. Acid.

Angina Membranacea. Spong. Hepar.

Asthma of Miller. Samb. Mosch., 1—2 grs.

Collection of Mucous in the Bronchia. Ipecac. Tart. Ant.

Helminthiasis, (Ascarides and Oxyurides.) Cina. Mother Tinct.

Tinea. Graph. 1.

Serpiginous Crusts. Graph. 1.

Caries of all the hollow bones, Spina Ventosa, Osteomalacia. Ol. Jecor. Assel. In some cases Calcar. and Silicia in high dynami-

- zations; we can cure more promptly by Kali Hydriod, 15 grs. in several ounces of water.
- Chlorosis.* Although Puls. Sepia. have often been useful in feeble doses, nevertheless Ferrum is necessary, perhaps in the form of Ferri Carb. perhaps as Tinct. Ferri. Acetic or martial baths.
- Leucorrhœa.* Stann. Iod. Merc.
- Tabes Dorsalis.* Chin. Ferr. cured with cold water.
- Inflammation* of all the noble organs, namely, of the Heart, Trachea, Lungs, Brain, Acon. Bry. Bell. Cann. Seneg. Squill. Rhus. Merc. Phos.
- Ophthalmia.* Euphorb. Cann. Puls.
- Otitis.* Puls. Graph. Iod.
- Glossitis.* Merc. Bell.
- Œsophagitis.* Bell.
- Gastritis.* Nux.
- Enteritis.* Nux. Canth.
- Peritonitis.* Canth.
- Cystitis.* Bell. Con.
- Ovaritis.* Bell.
- Metritis.* Platin.
- Orchitis.* Clemat. Spong.
- Puerperal Fever.* Acon. Bry. Bell.
- Nervous, Versatile and Stupid Fever,* (Cerebral and Ganglionic Typhus.) Bry. Rhus. Phos. ac. Hyos. Stram. Merc. Opium. Spts. Camph. Arsen.
- Pituitous Condition.* Carb. v. Ipecac. Ars. Phos.
- Gastric or Saburral Fever.* Ipec. Puls. Merc. Bry. Rhus.
- Morbus Maculosus of Werlhof.* Rhus. Ars. Secale.
- Indigestion, Vomiting.* Ipecac. Antim. Puls.
- Chronic Catarrh, Blennorrhœa of the Lungs.* Puls. Stann. Mang. Pinpinel.
- Dry Asthma.* Con. Samb. Sulph.
- Humid Asthma.* Ars. Tart. Ant. Ipecac.
- Sanguine Apoplexia.* Bloodletting, afterwards Bell. Arn. Opium, Stramon.
- Rheumatism.* Rhus. Bry. Chin. Coloc. Merc. Sulph.
- Lumbago, Ischiatica.* Rhus, Bry. China, Coloc. Merc. Sulph.
- Paralytic Diarrhœa.* Secale. Phos.
- Arthritis.* Sulph. Rhus. Rhod. Colchic. &c.
- Erysipelas, Zona.* Bell. Rhus. Merc.
- Impotence.* Cann. Chin. Ferr.
- Hypertrophy of the Uterus.* Bell. efficacious also in high attenuations, in chronic cases. Iod.
- Goitre.* Spong. Iod.
- Hypertrophy of the Ovaries, of the Prostate,* chronic eruptions (a great number of medicines against the different forms.)
- Vesicular and Pustular Itch.* Sulph. Verat. Hell. Carb. v.
- Tenia, large.* Filix mas. Cortex Gran.
- Hydropsies of all kinds,* especially Hydrothorax; although Arsenic (first trituration) acts as a palliative, Digital. Hellebor. Sulph. in the same manner. Ascites (merc. solub. gr. $\frac{1}{20}$, &c.
- Hydrometry, Hydروvaries, Anasarca.*
- Diabetes Mellitus.*
- Labor Pains,* as too strong. Secale, often also Nux and Pulsat in the feeblest doses.
- Icterus.* Calomel Solubil.
- Gonorrhœa.* Petrosel. Cannab.
- Gonorrhœa Secund.* Sepia, Sulph. Cinnab. Thuja.
- Syphilis Primary.* Mercur. Nitric Ac., (we should commence with small doses.)
- Condylomata.* Thuja.
- Secondary Syphilis.* Ozœna. Syphiloides Kali hydriod.
- Marasmus Senilis.* Phos. Œther Phosphorat.
- Allgemeine Homœopathische Zeitung, Vol. 18, Nos. 14, 15, 16.*

HOMŒOPATHIC THERAPEUTICS.

TRANSLATED FROM DR. BEAUVAIS' EDITION
OF DR. BIGEL,

BY
JAMES KITCHEN, M. D.

No. XIII.

INFLAMMATION OF THE BRAIN.

The symptoms of this disease are unusual heaviness of the head, tensive, binding pain, sometimes piercing, confusion of ideas, anomalous sensations, giddiness, stupor, with muttering delirium or exaltation, in which the patient is affected by the slightest noise, eye shining, wild, countenance staring, furious delirium.

The patient complains of heat of head, with cold extremities; there is a constant burning sensation. The face is red, hot, swollen, eyes red, the organs of sense very irritable; at times there are various spasmodic symptoms, and other secondary affections.

The accompanying fever is sometimes weak, and at other times very severe, according to the seat of the inflammation, or the constitution of the patient, and may assume every type.

There are different kinds of inflammation of the brain, and they may declare themselves with more or less violence. The predominant plasticity of the nervous system in childhood, makes them more liable to it than adults, and chiefly such as have a very prominent forehead. If the disease be not attacked with energy at the very commencement, it may run into dropsy of the brain in children. The frequent congestions of this organ in them, present all the symptoms of encephalitis, but in a less degree. Another state which bears a near resemblance is when they are just weaned,

and which is characterized by cries, restlessness, redness and swelling of the face and eyes, complete wakefulness—they refuse the breast.

The chief of all the remedies against encephalitis, and especially against inflammation of the brain in children, is *Belladonna*—the following are excellent indications for its use: the children constantly press their heads in their pillow, they are startled by the least noise or light, snoring sleep, great heat of head, face red and puffed, with visible beating of the arteries of the head and neck, veins swollen, together with the symptoms mentioned above, &c., occasionally hydrophobic phenomena.

If the patients are young, plethoric, if the inflammation has supervened to a violent exposure of the head to cold, it is best to moderate the fever, to give a dose of *Aconite* before having recourse to *Belladonna*. We should follow the same course in acute hydrocephalus. Encephalitis arising from exposure to the sun is cured by repeated doses of *Camphora*.

That caused by the disappearance of an *Erysipelas* shows itself by severe sudden headache, delirium, &c.; it is often followed by dropsy of the brain. In a great number of such cases *Belladonna* is the suitable remedy; but when there is a sudden recession of an *erysipelas* of the face, we should prefer *Rhus Tox.* 30; if from a recession of an inflammation of the external ear, *Pulsatilla* 18 often corresponds better than *Belladonna*, but this last is always the specific remedy, when the encephalitis shows itself after the disappearance of scarlatina, or when it is added to this exanthema. Should an encephalitis threaten to become a hydrocephalus, *Mercur. Solub.* is often capable of preventing it; should this last be already developed, *Belladonna* and *Mercurius* will still be of great service, but we may also administer, according to the symptoms, *Arnica* and *Digitalis*.

In the Clinique Homœopathique, 1050th ob-

servation, we find the following in relation to the above disease by M. Wahle.

It is not rare to see cases of encephalitis, in which neither Aconite nor Belladonna is of any service, and effusion supervenes very quickly; the prevailing symptoms are as follows: face of a deep red, almost brown, eyes rolling in their orbits, now closed, then again wide opened, lips dry, tongue coated with a brownish yellow, tension and swelling of the belly, constipation, generally retention of urine, or, at any rate, difficult excretion, respiration quick, anxious sighing, deglutition difficult, skin of whole body dry and burning. In these cases Bryonia acts surprisingly. Should the tongue be yet moist, place on it a few globules Bryonia 30; if dry, we should dissolve them in water, and administer them in that form. Soon after, the patient is better.

Sometimes, nevertheless, we only obtain relief, and not a cure, and chiefly, when the period of effusion is not perfectly defined, or that the remedy has been given too late. In such cases we must give another remedy about 24 hours after. The symptoms which then appear are generally the following: the violent febrile movements cease, the pulse becomes weak, slower, softer, and more irregular, the heat diminishes, as well as the thirst, the breathing is difficult, often accompanied with deep sighing, and then again easy, seemingly for the better. The excessive sensibility is changed to insensibility, impossibility to get up alone, involuntary movements and trembling of the hands, which are raised to the head, but which fall down immediately; the child often rubs the nose, which is dry; twitchings of the eyelids, half opened, the pupils constantly directed upward or to one side, the head following and pressing into the pillow, insensible to light, pupils dilated, skin of the forehead wrinkled and covered with hot sweat, which soon becomes cold, it seems to desire nothing, does not drink, but always moving its

mouth as if it would drink; if drink be presented to its mouth, it seizes the vessel with avidity, and its hands tremble very much; after having drank, its mouth continues its motions, it is easily angered, strikes about, pushes every one away, and, if it be spoken to, becomes still more agitated, the face seems swollen, pale, the forehead more prominent than usual, stupor is constantly present, the head thrown back, muttering, frequent jerks, often crying out, unable to hold the head steady, pulse sometimes small, quick, and, at other times, scarcely to be felt, suppressed, nostrils dry, dirty, lower jaw fallen, and, when raised, immediately falling down, hands and feet becoming more and more cold, covered with a cold moisture, rattling in the throat, and death with a struggle.

If such a train of symptoms manifest themselves after the useless administration of Belladonna or Bryonia, we shall obtain no more success from Arnica, which some recommend, but a single dose of Helleb. Nig. 30 will soon, even in some hours, relieve the patient; but to obtain this success, we must not give it in a low dilution, since the more the energy of a medicine is developed, the sooner the cure begins in acute diseases, and it is not necessary to wait for the exacerbation, which in acute cases frequently brings on death. Should it so happen, which is rare, that the amendment does not take place in six or eight hours after the administration of Helleb. Nig. we still possess an excellent remedy in Tinct. Sulph. 30. We do not give it internally, but make the patient smell a few globules in solution.

In the 1038th observation of the Clinique Homœopathique, Dr. Gross makes the following remarks:—

During the severe cold of 1829, I treated many cases of brain affection, of children under seven years, but rarely a pure encephalitis, but rather what is called by the old school, rheumatic meningeal inflammation, they were

characterized as follows : great depression and vertigo for several days, sometimes even a week, announcing the invasion of the disease, dull headache, obliging the patient to recline, vomiting, continuing through the course of the disease, high fever, urine muddy immediately after its passage, clay colored, and soon depositing a dirty yellow sediment, then becoming red, and forming a pellicle on the surface—a deep red color and a cloudiness indicated an exacerbation—stools at times very hard and costive for several days, and then diarrhoea, total loss of appetite, perfect indifference in bed amongst the majority, without complaining of any thing except headache, and a complete increasing prostration of strength—they spoke with pain or were delirious, often stupified, and almost constantly preyed upon by a dry, burning heat, the skin only becoming moist when convalescence took place.

In one case opisthotonos supervened—sometimes the tongue would remain clean and moist, only a little redder than ordinary—at other times there would be a brown, dry streak down the middle, rarely all red, dry and cleft—the patients almost always complained of thirst—at night sleep or rather stupor, which was not refreshing.

Aconite was always of service at the commencement, after which, according to the symptoms, I gave Belladonna, Acid. Phos., Rhus, Merc., or Hyoscyam. In many cases the predominant state was that of stupor, grinding the teeth, eyes half open—it was difficult to correct this condition, and when awake, they were not conscious, complained of nothing, wished for nothing, often vomited, &c.—Tinct. Opii. 6, cured them ordinarily in a few hours.

Others had a more natural sleep, without stupor, but with twitchings of the limbs—they groaned, were agitated, and on awaking manifested a peculiar absence of mind, with haggard eyes and forlorn air—they looked

steadily at one thing, threw themselves backward with horror, and sometimes cried out for protection, as if pursued, and wanted to be shielded from horrible spectres, &c., high fever, red face, moist skin, &c. Tinct. Stramon. 9, soon dispelled these symptoms. In some patients between 15 and 25 years of age, the symptoms, though similar in general, differed somewhat; they were reclined in a complete prostration, only complaining at first of headache, but which ceased at a later period, slept little, did not speak, were not willing to answer questions, whether they did not understand them or were too weak to answer, appeared scarcely to comprehend any thing, scarcely moved, without, however, having lost all knowledge. Spt. Nitri. Æther. was the best remedy in this dangerous condition. I only lost one patient under this treatment.

ON CONSTIPATION.

By DR. KALLENBACH,

OF BERLIN.

BY JAMES M. QUIN, M. D.

Chronic constipation (or that which has become habitual) can never be regarded as a form of special disease; it is but the consequence, or more correctly speaking, the symptom of another pathological state. But as the pathological circumstances which may be the cause of constipation, are of very different natures, frequently opposed to one another, sometimes impossible to be recognized, or easily con-

* Revue Critique et rétrospective de la Matière Médicale Spécifique. Vol. I. 1840, p. 511. Paris, chez J. B. Ballière.

founded, the distressing symptoms of habitual constipation have always been a stumbling block to physicians. The treatment of this affection reflects little credit on the old school. Instead of a sound diagnostic, it ordinarily advances a crowd of words, as, *abdominal plethora, atony of the intestinal canal, hæmorrhoids, bad qualities of the bile and intestinal secretion*, which do not, however, prevent them from combating with the same weapons, i. e. purgatives, all these diseases, so various in their characters. They are contented, for the most part, with distinguishing whether it be a drastic, a salt or an oil that is indicated, and they pour the medicament into the stomach of the patient, for the purpose either of correcting the bile or of increasing the secretion of it, either of provoking the serous secretion of the intestinal canal, or of stimulating its sluggishness, or, in fine, of destroying the cause of the constipation, whatever it may be. In the most fortunate cases, such a procedure produces but a temporary alleviation, and we could cite thousands of patients who take several times a week their pills of aloe or some other wonderful remedy, even to satiety, (so much do they abuse the use of them) and who, nevertheless, see the evil that they have been opposing for years, become more and more obstinate and painful.

Homœopathia can boast of happier results in a large number of cases, and it is not a slight advantage for it to be able, even in the absence of a diagnostic, properly so called, to cure frequently by the mere comparison of the symptoms.

There are, and there will always be, even when science shall have made the greatest progress, many cases, in which it is impossible to reconcile the morbid phenomena with the interior condition of the diseased organism, and in which, consequently, the diagnosis is impossible, or at least, extremely uncertain. Then, but only then, the purely symptomatic

treatment may be applied, frequently with great benefit.

Every physician who has at heart the well-being of his patients and the advancement of science, should, then, not only desire that the purely symptomatic treatment should become more and more rare; that we should learn to distinguish better and better the true causes of disease, and choose the medicament accordingly; but he should, still further, contribute to that end by every effort in his power. This it is which has determined me to publish these observations, the sole object of which is to induce abler practitioners to make known their observations on this subject. If we could collect all the experiments made on so common an affection, compare them with one another, and make a general classification of them, not only would the diagnostic of it be more certain, but, what is more important, our knowledge of the medicaments and their characteristics would be thereby increased. We would gain more confidence in the treatment, and our patients would have greater chances for cure.

When we speak of habitual constipation, we exclude therefrom even all the cases of acute diseases, of fevers, of hernias, of ileus, of poisonings, &c., with which constipation is symptomatically connected, and we understand only that state in which there are no regular alvine evacuations, but at intervals of two, three, eight days, and even more, the health being otherwise relatively good, or general troubles, more or less considerable, being habitual.

The ancient pathologists have scarcely given themselves the trouble to investigate the different causes of this affection. Hippocrates says not a word on the subject in his work *De Hæmorrhoidibus*, and only speaks of it in a very vague manner in the treatise *de Flatibus*, which is not considered genuine. Stahl and Kaempf are the first who have directed their attention, in the eighteenth century, to

the chronic obstruction; but they have assigned only a single cause for this affection. The former* ascribed it to hemorrhoids, and the latter† regarded it as a concomitant symptom of his *infractus*, and treated it accordingly. It is only of late years that the French and English physicians, especially, have given particular attention to the chronic diseases of the lower belly, and have cultivated the pathological anatomy of the parts. They have collected valuable materials on this subject; and yet our knowledge of the remote causes of these diseases cannot but be still very imperfect, because the autopsy only enables us to discover the results of a disease frequently of several years standing, and does not permit us to follow its successive progress.

In the present state of the science we may attribute the proximate cause of habitual constipation to the following pathological conditions:

I. Atony of the intestinal canal, especially of the lower portion.

II. Irritative condition of the intestinal canal, embracing nervous difficulty, inflammations and rheumatic irritation.

III. Hemorrhoids.

IV. Organic diseases of the liver.

V. Stenosis and disorganization in the intestinal canal.

We do not pretend that habitual constipation cannot depend on other causes; but the above are the most common, and are most frequently met with. We have abstained from any severely systematic classification, such as, functional disturbances, organic destructions, dislocations, because such classifications are true only on paper; in life they are modified and complicated in a thousand ways.

* G. E. Stahl, *Medica vera*, Hal. 1737.

† Kaempfer, *abhandlung von einer neuen Methode die hartnäckigsten krankheiten, die ihren Sitz im Unterleib haben, sicher und gründlich zu heilen*. Leipzig, 1786.

I. ATONY OF THE INTESTINAL CANAL.

The atony of the intestinal canal, which occasions habitual constipation, never has its seat in the small intestine; for, by its structure, and principally by the irritability of its mucous membrane, it cannot long support the presence of foreign bodies; but a more copious secretion of mucosity, or the contraction of the muscular fibres, soon either provokes diarrhœa, or at least propels the excrement towards the lower portion of the intestinal canal. The large intestine, on the contrary, the colon, particularly the transverse and descending portions, as well as the rectum, which are intended, by their physiological functions, to collect and to retain temporarily the feces, and where, consequently, a moderate quantity of excrement in the normal state scarcely excites an irritation, can endure a prolonged stay of their contents, without being incommoded thereby, or provoked to reaction. But if, from any cause whatever, this irritability, already inconsiderable of itself, becomes still less, a greater quantity of excrement collects there; the large intestine becomes accustomed to hold it longer, and contraction only takes place when these contents operate as a foreign body, either by their mass, or by the absorption of their liquid parts. The natural consequence is a progressive dilatation of the intestinal canal, which, in its turn, becomes the cause of a new accumulation of fecal matter, and, consequently, a new cause of disease, so that the entire lower tract of the intestinal canal reaches a state of relaxation more or less considerable.

Some cases of obstinate constipation prove how far the organism can become accustomed to an abnormal state, when it is gradually developed. *Heberden* tells us of a person who had regularly but one stool a month, and who, nevertheless, enjoyed good health. *Tomasini*, cites the case of another person, who had

one every twenty-four days ; *Chaptal*, another, who visited the closet only every four months ; *Crampton* and *O'Beirne* have seen those who had but one alvine evacuation every eight months. *Ruste* tells of a captain of a vessel who never evacuated his fœces as long as he was at sea. Admitting that there is some exaggeration in these extraordinary cases, we cannot deny, and every practitioner has had occasion to convince himself of the truth of the fact, that constipations of four to six and eight days are not injurious, at least immediately, to the general state of the individual. It is not rare, either, after a constipation of several days, to see an evacuation of an enormous amount of fœcal matter, which could not have been contained within the organ destined for its reception, without a considerable dilatation. *Lamaqurier* found in the intestines of a pregnant woman, twenty pounds of fœces. *Abercrombie*, and more recently, *Rockiansky*, of Vienna, have very frequently met with an utriform dilatation of the colon, which had acquired double its ordinary capacity, so that the entire small intestines seemed excessively thinned, and the muscular fibres absolutely incapable of an energetic contraction.

Ætiology.—The atonic state of the lower tract of the intestinal canal may present itself at every age, but particularly in old age. It extends not only to the mucous membrane, but also, and especially, to the muscular fibres. The causes which diminish the irritability of the large intestines, and thus provoke the disease, are very varied, but may, nevertheless, be reduced to three :

1. The over-excitation of this organ by a temporary local disease, or by the abuse of unsuitable food, or by medicines. Among the number of the diseases which induce it, we should place above all diarrhœas of long duration, dysenteries, lead colics, and inflammations of the intestinal canal, affections which frequently leave behind them thickenings and

degeneration of the mucous membrane, which, most frequently, produce in like manner, disturbances in the muscles, and consequently in the functions, of the entire organ.

Hæmorrhoids act in like manner, when the repetition of acute attacks carries the irritability of the rectum to a too high degree, and puts it in a condition bordering upon exhaustion. Among the medicines which occasion the over-excitation of which we are speaking, we may mention drastic cathartics, Aloes, Morrison's pills, so much extolled of late, Calomel and Rhubarb, which still form almost the nourishment of infants in the cradle.

2. A more frequent cause, perhaps, of the relaxation of the intestinal canal, is the pernicious habit of not immediately satisfying the desire to go to stool. The large intestine is, as we have already said, only moderately irritated by the normal mixture of fœcal matters until they act as a foreign body, after the absorption of the liquid particles, and the contraction of the muscular fibres is inconsiderable. If the spontaneous force of the sphincter opposes the evacuation of the excrement, the contraction of the intestine is easily rendered ineffectual, and the irritation is not sufficiently energetic to produce a new and more powerful contraction of the intestine. We do not know whether the mucous membrane, in order to quiet the irritation caused by the presence of the fœces, secretes a greater quantity of mucosity, or whether the aptness of all organic parts to accustom themselves to an abnormal state, acts in this instance with still greater intensity ; but experience has clearly shown that children especially, who do not immediately satisfy the desire for stool, very easily contract the habit. Among pregnant females, the pressure of the uterus mechanically disturbs the functions of the intestines, and thus very frequently induces a relaxation of the muscular fibres.

3. Individual constitution, especially a phleg-

matic temperament, and the torpid form of scrofula which is often connected with it, are no less favorable to constipation, and in such persons this affection presents itself mostly with the etiological characteristics laid down in No. 2.

Diagnosis.—In a case of chronic constipation, it is difficult to determine with certainty whether atony of the intestinal canal be the occasional cause, especially when we can get no information from what has gone before. A great number of physicians lay down as general effects and as concomitant symptoms of every habitual constipation, furred tongue, distress, distension of the abdomen, foul breath, frequent eructations, vertigos, headaches, and other symptoms of congestion. These various phenomena, in the majority of cases of constipation caused by atony of the intestinal canal, do not continue for a long time, at least at the beginning of the disease, or manifest themselves to a remarkable degree, only when it exists with some complication. With regard to the tongue, we may admit as a general axiom, that *its condition is of no importance in affections of the large intestine*, and that it acquires a semiotic value only when the disease attacks the small intestine, or when general febrile symptoms show themselves.

In the case of atony, habitual constipation may generally continue four or five days without particular inconvenience, especially in phlegmatic persons. It is only when it continues for a longer period, or when the individual is very irritable, that we observe in a slight degree the symptoms above mentioned. An attentive examination of the patient proves also that the activity of the kidneys and of the skin is greater than ordinary, and these organs seem to discharge the functions of the intestinal canal.

A remarkable circumstance, as contrasted with constipation caused by irritation, is, that in the obstruction proceeding from atony, nu-

trition suffers less, and that, if the patient experience considerable inconvenience from the prolongation of this state, it does not diminish in a very marked manner after a stool, but ceases only at the expiration of some days, as if the relative well-being of the organ depended on a certain engorgement.

What then are the signs by which we can ascertain with certainty whether a constipation has for its cause, atony of the intestinal canal? To this question we can only give a negative answer: that is, we can only note the absence of symptoms which mark another disease, especially a state of irritation or of organic changes in the intestinal canal, an absence which indicates, with great probability, the existence of atony. If a constipation of several days be, besides, relatively less painful, and if nothing in the preceding condition contradict the diagnostic, we may safely affirm it and direct the treatment of it accordingly.

Treatment.—Of the numerous medicines, palliative or empirical, of the old school, there are some which ought to be mentioned, because their effects may, in all probability, be reduced to the principles of Homœopathy. *Quinquina* has been lately recommended by *Howship*,* as well as by *Wilson Philip*, in cases of chronic constipation caused by the sluggishness and relaxation of the rectum, as a sure and radical cure, which has many a time restored the function of the intestinal canal to the normal state.

In our time *M. Fleury*† has described the state of atony, under the name of idiopathic obstruction, and has advised, as a specific means against this disease, the introduction into the anus, to the distance of three or four

* Practical observations on the symptoms, discrimination, and treatment of the most important diseases of the lower intestine and anus, by *Solon Howship*. London, 1821.

† *Archives générales de Médecine*, Mars, 1838, p. 336-345.

inches, small pieces of cotton wick, smeared with an ointment made of extract of Belladonna or Hyoscyamus and lard. This treatment, in his hands, has succeeded in many cases. He leaves these pieces of wick from twelve to eighteen hours in the rectum, and he assures us that he has cured the most obstinate constipations in a few days, by means of fifteen to twenty pieces of wick. According to him, the wick acts on the relaxed rectum as a foreign body, and provokes therein a reaction which restores the fibres to their contractibility. The ointment of Belladonna or Hyoscyamus only serves to diminish the too great irritation produced in the rectum by the suppository, and to accustom the intestine to retain it. But we may object, that the rectum may be sometimes too much, and sometimes too little irritated; and there are few physicians who would ascribe the cure to the mechanical irritation of the pieces of wick (which remind us of the neglected soap suppositories of former days) and not rather to the specific virtue of the Belladonna or Hyoscyamus. It is at least certain that the symptoms of Belladonna and Hyoscyamus favor a like specific relation, and it would be well worth while to try these medicines on the occasion. Must we, in a case wherein it is so easy to reach the very seat of the disease, prefer the local application, even of a piece of wick, to the ordinary ingestion by the mouth? This is another question which the physician will solve the more surely in a particular case.

Of all the Homœopathic remedies hitherto recommended, *Aurum muriaticum* appears to us most suitable for the state of atony. We have lately found it very efficacious in two cases. *M. Legrand*,* who belongs to the old school, has already said that metallic gold, reduced to a very fine powder, revives the vital force, and gives tone to the stomach and the

whole digestive apparatus; and *M. Baudeloque*, who has administered very recently *Aurum oxyd. hydrochlor.* in doses of 15 to 20 grains a day against scrofula, but without success, equally extols its tonic action on the muscular system. The happy results which Homœopaths have obtained in employing it against hernia, prove the strong specific relations which it has with the functions of the intestinal canal. A great number of striking experiments demonstrate its efficacy against the obstruction which results from inactivity of the rectum; notwithstanding, we must acknowledge that sometimes its effects are only transient, and that after its use for several weeks, even for several months, the disease, which we had supposed conquered, reappears. Such cases of constipation are very obstinate, and of very long standing, which scarcely ever present themselves, except in individuals of advanced age, whose intestine is probably so much dilated that it is impossible for art to restore it to its natural state. The *prunus padus*, and more frequently, *Natrum muriaticum* (2d and 4th dilutions) have, in such cases rendered us important service. If we administer these two medicines in alternation, at suitable intervals, we shall rarely have occasion to have recourse to other means. *Sepia* has also been mentioned, but we have not, hitherto, had occasion to employ it.

As a local means, we ought to mention clysters and cold applications.

Clysters are indispensable in all cases wherein the object is to procure a prompt evacuation, while they form a valuable means in other respects; for they favor and facilitate the action of the internal medicaments. Still we should not recommend the unconditional use of them in cases of obstruction proceeding from atony of the intestinal canal; indeed, we must have recourse to them only as little as possible, because they do more harm than good. The effect of clysters is two-fold: first,

* Revue Médicale de Paris. Avril, 1838.

they facilitate the evacuation of the fecal matter, by rendering it liquid; next, they mechanically dilate the intestine, thus exciting it to reaction and contraction. The irritation which they produce is evidently only transitory; and if we add to them, as is frequently done, some soothing substances, as oil, soap, &c., or if we administer them warm, they relax still more the large intestine; so that, to produce the contraction necessary to the natural functions of this organ, we must have recourse to a repetition of the means. In atony of the intestinal canal clysters ought not to be administered warm, but cold (from 6 to 10 degrees of Réaumur) at which temperature they radically heal the relaxed intestine.

What we have just said leads us directly to the use of cold applications, especially of water, which has lately been recommended as the true panacea against diseases of all kinds. The enthusiastic partisans of the treatment by water greatly deceive themselves, if they imagine that the use of applications of cold water against constipation or other chronic affections of the lower belly, is a discovery of *Ærte*, or *Priessnitz*. *Wright*, and after him *Abercrombie*, in his admirable researches on the diseases of the intestinal canal, have quoted, striking examples of inflammation of the lower belly, of ileus and of volvulus, cured by local applications of cold water. Cold water has often, even, proved serviceable in cases of chronic constipation, against which all other means had failed. The most simple mode of employing it, is to apply to the lower belly naked a cloth dipped in cold water, and to leave it there one or two minutes. The effect will be still more energetic, if we sprinkle with a certain degree of force against the lower belly, the cold water contained in a large sponge. In both cases, the patient will do well to wipe the belly briskly, immediately after the application, to cover the part warmly, and to take a little

exercise in the apartment. A more violent application of cold water by means of baths will seldom be found necessary; for, in habitual obstruction, the object is less to produce a great irritation, than a continuous one. Persons subject to rheumatism will do well, after the application of the cold water, to induce a perspiration, by covering themselves warmly; because their rheumatic pains may easily be brought back by a chill.

Drinking cold water is a means that we may also recommend to every person subject to affections of the lower belly. It is impossible to determine the quantity precisely, it is for the patient to judge by the result, how much he ought to drink, and at what temperature. In ordinary cases we may take from a half pint to a quart in the morning, fasting, or shortly after breakfast; that will be sufficient to render the secretion of the intestine normal, and if we take an equal quantity sometime after dinner, and in the evening before bed time, we shall be doing all that the regimen requires. A very large quantity of water is never useful, and will only do harm, like every thing that is not natural. Experience has proved to us that it only serves to overexcite the activity of the kidneys, without producing the least effect on other organs. On the contrary, as long as the force of reaction is occupied by the increased activity of the kidneys, necessary for the secretion of that excess of liquid, the other functions of the organism are, as it were, benumbed, and the equilibrium between them broken.

It is unnecessary to say that the patient should observe a suitable regimen during the treatment. If he will not, from the beginning, abstain from all articles of food which might hinder the cure, he ought, at least, to use them only as little as possible, and especially to take nothing highly spiced, or which contains much ligneous and fibrous matter, as cabbages, radishes, turnips, green fruits,

&c., because these articles leave comparatively the greatest amount of fecal matter. In fine, to obtain a radical cure, we must not forget that the alvine evacuation is a function, neither purely involuntary, as respiration and digestion, nor totally dependent on our will, and that we may justly apply to it the proverb: "Habit is a second nature:" smokers, and coffee drinkers do not ordinarily experience the desire to go to stool, except after having smoked their pipe in the morning or drunk their first cup of coffee; and persons who lead a sedentary life, often suffer from constipation as long as they are travelling, or taking some unaccustomed exercise. We should then, when nature is accustomed to an abnormal state by habitual constipation, seek to bring back the normal state by an opposite habit. Thus the patient will do well to remain every day, at a certain hour, for a long time on the close stool, to wait until the desire, which he does not feel, or feels but faintly, is experienced in a stronger and more regular manner. This precaution will be very useful, especially in young people, among whom a considerable dilatation of the intestinal canal is not yet to be feared, and the reaction is still energetic.

DIFFICULTY OF DISCOVERING FISTULA IN ANO.

A French contemporary, remarking "that this is the disease, the diagnosis of which is probably more subject to error than that of any other," cites the following case in proof of the assertion:—P. B., of Marseilles, thirty-four years of age, and of a robust constitution, had suffered from hemorrhoids for six years, when he contracted three successive blenorr-

rhœas (*écoulemens*), which were succeeded by so much difficulty of micturition that the urine was voided only drop by drop, and with much pain. The evacuation of the feces was also painful, and the discharge of hardened matters was only effected every three, or four days by the aid of clysters. Under the impression that stricture existed, the patient was subjected many times to cauterization of the urethra, and was subsequently put, first on a mercurial course, and afterwards upon a course intended to combat an herpetic tendency to which he had formerly been subject. At length the patient could no longer pass his urine without the aid of the catheter, nor even then without strong pressure upon the hypogastrium; he also suffered severely on going to stool. After two years and a half of suffering, in 1839 he consulted a surgeon, who, having passed a catheter with ease into the bladder, ascertained that no stricture was present; but on finding a hardened body about an inch above the anus and close to the neck of the bladder, considered the prostate to be diseased. He contented himself, after several bleedings and the application of leeches, with enjoining a very low diet, which produced a temporary alleviation of his evils, but a slight departure from which caused their re-appearance with redoubled force. The internal and external application of Iodine was productive of no benefit, and the disease was pronounced incurable. The patient now consulted M. Lallemand, who ascertained that the hard body felt in the rectum was an hemorrhoidal tumour, instead of a cancerous prostate, as had been supposed. Judiciously considering, however, that this was inadequate to have produced all the preceding symptoms, he pushed his examination to the discovery of a fistulous opening, the operation on which caused the speedy disappearance of the preceding distressing symptoms.—*Gazette des Hôpitaux*, Suppl. Oct.

ENTERITIS ACUTA.

Translated from Beauvais' Clinique,

BY

H. M. HUMPHREY, M. D.,

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In September, 1832, I was called to attend a young woman, aged fourteen years, who, after being heated, had imprudently exposed herself to cold, and was attacked by well marked symptoms of enteritis. During the first six days she had been bled eighty-seven times, had used fomentations, emollient cataplasms, liniments of oil, of henbane and laudanum, injections, hip baths, and emulsions, and had taken Calomel united with Opium; but with all these, instead of being relieved, the disease increased in severity till the seventh day: the patient was then almost in articulo mortis. Dr. Siegel, who, for the last two years, had been practising Homœopathy, and who, previous to that, had been a practitioner in the old school for fifty years, proposed that I should make a trial of the former method, at the same time adding that little could be expected to be done in so violent a case, of seven days standing, without the appearance of anything like crisis, and for which such a quantity of Calomel and so many blood-lettings had been prescribed. Although an enemy to the new system, I adopted his advice, having lost all hope of saving my patient by the ordinary method of practice.

I prescribed Aconite $\frac{3}{24}$, repeated every three hours during the night: to my great surprise, on the morning, the eighth day of the disease, the patient was much better: for the first time since the commencement of the dis-

ease, she slept for a quarter and half an hour at a time. The continual vomitings, provoked by all she took, had ceased; the pains in the lower part of the abdomen, until then without cessation, had almost entirely disappeared: the abdomen itself was not as sensitive to the touch, nor as swollen and hard: the fever, which had not abated from the commencement, was nearly gone: and all this change had taken place without any thing like crisis being present, such as sweatings, an increased flow of urine, &c. A few doses of Aconite were administered during the day, and on the following day she was perfectly cured.

Her convalescence was long; she was very weak and it was not until the end of three weeks, that she was able to walk without assistance. During the fourth week, she exposed herself to a current of air, which caused a recurrence of the same disease. Pain in the umbilical region, increased by the slightest pressure, frequent painful eructations, vomiting of yellowish green matter, constipation, a small, quick, and hard pulse, general heat, thirst, anxiety and continual agitation made the nature of the case sufficiently obvious. I again had recourse to Aconite $\frac{3}{24}$. In fifteen minutes after its administration, the patient fell into a calm sleep, which lasted over three hours: on waking was greatly relieved, complained no longer of any of the preceding symptoms, and on the next day left her bed.

Affections of this kind, when left to nature, or treated Allopathically, continue generally for seven or nine days before coming to a termination; it may be supposed then that I was surprised to see so rapid a cure effected by a single dose of Aconite, without too, the use of any either external or internal Allopathic measures.—(*Kramer.*)

An enteritis, consequent upon cold, characterized by violent cutting pains in the umbilical region, swelling and painful sensibility of

the belly, malaise, violent chills, heat of the face, pulse hard, tense and irregular, skin dry and burning, thirst, short breath, &c., was cured by three doses of *Aconite* $\frac{3}{30}$ and *Beladonna* $\frac{3}{30}$, in two days.—(*Tietze*.)

On the 3d of September, 1843, I was called to see a man of robust constitution, aged thirty-six years, attacked with the following symptoms, viz : tearing and lancinating pains in the umbilical region, augmented by pressure or touch, also by taking a long breath, alternations of heat and cold, sleeplessness, tongue dry and heavily coated with a white fur, thirst, stools hard and somewhat copious, slight pain in the head, pulse quick and tense, urine high-colored. Four doses of *Aconite* $\frac{6}{8}$, one every four hours, were given. The following day the pains were much diminished and the other symptoms somewhat abated. I prescribed the same remedy, a dose every six hours : after which the pains became less and the fever almost disappeared. The patient complained only of the hardness of his stools, for which *Nux vom.*, 6 *gtt.* 1, every evening was administered and the cure effected.—(*Wolfshon*.)

Was called in December, 1834, to see a student, strong, robust, aged twenty-two years, with black hair, dark complexion, and of an amiable disposition.

While walking on a cold, damp day was attacked with colic, for which he drank a glass of rum. An hour after, for the same purpose, he took a bath, rather cold than warm, where he remained a half hour without any cessation of the pain, which suddenly became so great that he had scarce power to dress himself ; in a short time after was attacked with violent chills which obliged him to lay down in bed, and which lasted nearly an hour. To these succeeded insupportable pain below the umbilicus, which extended to the sides of the abdomen, accompanied with jactitation, great thirst and a dry heat.

As the disease was supposed to be only a slight affection, resulting from cold, cloths wrung in warm water were applied and teas given to drink. I was called at nine in the evening, when, instead of amelioration, the symptoms had increased in severity. He had been suffering for five hours ; abdomen hot and tense ; the least pressure, even that of his bed clothes, on or below the umbilicus, produced extreme pain, skin dry and hot, pulse small, irregular, rather hard, and making 105 pulsations per minute ; tongue dry, very red on the edges, covered in the middle by a white fur, great thirst, drinking augmented his sufferings, and produced a peculiar feeling of anguish in the region of the umbilicus, respiration accelerated and short, tossing about which aggravated the pains, no evacuation since morning and had not urinated for several hours.

All these symptoms indicated an inflammation of the small intestines, and a portion of the internal surface of the peritoneum.

I prescribed six doses of *Aconite* 18 *gtt.* : one every four hours until a cessation of the pains, at the same time allowing him to take oatmeal gruel or milk of almonds, made hot and thick.

By eight in the morning he had taken three doses of *Aconite*, but had not felt any relief till after the last had been taken ; no sleep during the night, and great thirst ; temperature and tension of the abdomen as before, and still tender to the touch, pulse 98, tongue in the same condition, had evacuated a considerable quantity of very red urine.

At three o'clock not as well as in the morning ; gave a fourth dose of *Aconite*.

At nine in the evening was much better : since seven the pain had somewhat abated, the abdomen could bear a slight degree of pressure, the heat and tension had diminished in proportion, was not restless ; his pulse although as frequent, was not as tense

nor as hard; thirst still continued to be great.

I continued Aconite; from the following night the patient became better, and thirty hours after the signs of inflammation had disappeared, with the exception of a sensation of pressure in the abdomen. Seven doses of this remedy had been taken.

As he had had no evacuation, I gave him *Nux vom.* 24 gtt., particularly as I thought it also indicated for the pressure. Ten hours after he had a hard but copious evacuation. The sense of pressure on the next day was nearly the same; this was all he complained of. I then administered *Belladonna* $\frac{8}{30}$, and two days after, this remedy not having produced the desired effect, *Carbo veg.* 9 gtt. $\frac{1}{2}$ was given. In four days he was enabled to walk, and a second dose finished the cure.—(Schwarze.)

A female, aged twenty-one years, of robust constitution, was admitted into the Hospital on the 24th of January. In infancy she had been attacked by smallpox and scarlatina: from that time till the third year of her age, prior to which she was perfectly healthy, she was taken with a violent peripneumonia which lasted nearly six weeks. Her menses, although copious, took place regularly: they had ceased, however, eight days previous, when she was taken with a violent cold, accompanied by pain in the head and extremities. On the 21st, in the afternoon, had a severe chill, with vertigo, to which were added pains in the abdomen, alternating with pain in the throat, and very violent headache. On entering the Hospital the following symptoms were presented:—

Painful beating in the occiput, pressure in the forehead and eyes, cutting pain in the abdomen, recurring periodically, extending sometimes to the back, often so violent as to cause a profuse sweating and oppression in breathing; after the disappearance of these pains there was left a sensation of smarting in the

region of the stomach, abdomen painful to touch, sometimes bitter taste in the mouth, lancinating pains in the throat on swallowing, more acute when those in the abdomen were less; great thirst, want of appetite, yet she eat whatever was offered her; stools irregular, pulse somewhat full without being frequent, weakness of the extremities.

On the 22d and 23d *Aconite* and *Pulsat.* had been given by the physician who had attended her. In the evening *Nux vom.* $\frac{2}{30}$ was administered: the pains in the abdomen were increased.

Sometime after taking the remedy the pains became less, but she could get no sleep, frequent tenesmus, headache slight, appetite somewhat better; gave *Ignatia* $\frac{1}{2}$.

In the evening an exacerbation of the pain in the abdomen, which diminished after a hard and copious evacuation, but returned in the course of a little time, lancinations in the throat, less during the day, painful beating in the occiput, confusion of the head, vertigo and copious perspiration.

But little sleep during the night, toward morning great exacerbation of pain in the abdomen, but the attack of shorter duration, headache, skin moist, urine clear and orange colored; at four in the afternoon another exacerbation, eructation and an evacuation. *Rhus Tox.* $\frac{2}{30}$ was administered.

On the fourth day no particular change—on the fifth, however, the pains in the abdomen had entirely ceased, with the exception of slight lancinations on the left side, slept tranquilly for four hours; diminution of all the pains, those of the throat alone being increased, to which was joined a feeling of roughness, causing tickling, and fits of hoarse, dry cough; these symptoms being increased in the evening, gave *Aconite* $\frac{2}{30}$.

Slept well during the night, but next day had a return of pain, not as severe, however, the cough being accompanied by a slight ex-

pectoration ; got up for a few hours, but owing to vertigo and weakness had to remain seated. Seventh day ; suffered more from the cough, and a heavy cold, sleep disturbed ; gave in the morning *Dulcamara* $\frac{2}{34}$: rest of the day was somewhat better.

Eighth day ; slept well during the night, in the morning a general perspiration, pulse excited, vertigo increased, headache more severe particularly in the forehead, catarrhal symptoms still continued, expectoration more copious, breathing quickened, urine clear and pale yellow ; remained thus till evening, when there was a slight amendment of the pains in the throat and the cough. *Rhus Tox.* $\frac{2}{30}$ was administered.

Ninth day : complained of having slept but little and being cold, appetite better, cough less, urine as before, pulse small and somewhat irregular. At nine in the morning, heat in the face greater, headache more violent, soon after general but slight perspiration.

The pains diminished little by little till the fifteenth day, when she complained of disturbed sleep, great weakness, pain in the head and cough. Toward morning a smarting in the pit of the stomach, followed by a loose stool, could not get up as on the previous day. These symptoms being joined with great irritability, gave *Pulsat.* $\frac{2}{34}$. Became better after this and quitted the Hospital in twenty-two days from her entrance. Menses came on, lasting four days and she was perfectly cured.

ACCIDENTAL POISONING BY IODINE.

TO THE EDITOR OF THE LANCET.

SIR—You will oblige me by giving the following case insertion in your valuable periodical. I am, yours, &c.

LEONARD BUCKELL, M. R. C. S.
Chichester, Feb. 4, 1843.

Mrs. A., aged 36, married, and having one child ; is of light complexion and nervous temperament, generally enjoying good, though not robust, health. She has a tumor situated *opposite and over* the sixth and seventh cervical, and first and second dorsal vertebræ, that has been five years attaining its present size, which is about that of a hen's egg, and has lately been treated by applications of nitrate of silver, with evident diminution of the swelling, and decrease in the pain which has always attended it. The nitrate of silver was applied for the last time on the 22d January.

23. Eleven, A. M. The caustic has excoriated the surface, but the tumour remains unaltered. Ordered the external use of the tincture of Iodine, diluted with half its own measure of spirits of wine. When this application came in contact with the excoriated portion of the swelling the patient instantly experienced *violent pain, and a sense of weight in the epigastric region, attended with universal tremors, faintness, cold and profuse perspirations, extreme collapse of the countenance, involuntary twistings of the arms, particularly the right, chattering of the teeth, inability to stand, and a pulse small, weak, and slow.* To this condition were quickly added *violent vomiting and spasm.* The patient was with difficulty removed to bed, when some gin and water were administered, and a hot fomentation was ordered to the epigastric region, after which the following draught was given every two hours :—

R. Compound tinctures of Cinchona Bark and Cardamum, of each three drachms ;

Comp. spirit of Ammonia, a drachm and a half ;

Peppermint water, an ounce and a half.

Mix for a draught.

Seven, P. M. Pain and weight at epigastrium considerably relieved by the treatment. General pain, however, much increased, and

vomiting is induced by assuming the erect position. Urine is continually dribbling away, attended with a constant desire of voiding it; feet cold; pulse weak and tremulous; bowels constipated. Apply bottles of hot water to the feet, and give a tablespoonful of castor oil every three hours until the bowels act freely.

24. Eleven, A. M. All the distressing symptoms are much relieved, though still aggravated upon rising in bed. Urine can be retained for an hour or more. Menstrual discharge has commenced, though not very profusely; the patient had been unwell eight days previously; bowels freely opened by the castor oil. Continue medicaments.

25. The patient considerably better; but suffering now from extreme debility, with a pallid face and a tremulous pulse; appetite very bad; bowels confined. Repeat the castor oil.

30. The patient has now recovered her accustomed strength and health; the catamenia had ceased on the day before; tumor very considerably lessened.

Here is a case in which the absorption of a very small portion of Iodine into the system produced symptoms of an alarming character, dependent perhaps, not so much on the quantity of Iodine entering the system, as upon some peculiarity in the constitution and condition of the individual upon whom it was used, since not more than four or five drops of the tincture had been applied before the above symptoms were produced.—*London Lancet*.

TREATMENT OF FISSURES OF THE ANUS BY RHATANY ROOT.

BY PROFESSOR TROUSSEAU.

M. Bretonneau appears to have been the first who recommended the rhatany root for the cure of fissures of the anus. He was led

to try its effect in this complaint from remarking, that constipation is in most cases the cause of the fissures, and the great obstacle to their cure. That this constipation is in a great majority of cases attended with a dilatation of that portion of the rectum immediately beyond the sphincter, which forms thus a place of lodgment for the feculent matters, which sometimes amass there to such an extent, as, when expelled, to cause pains equal in severity to those of delivery. To correct this morbid state of the gut, whether it was accompanied with fissures or not, and restore it to its original tonicity, was the object which M. Bretonneau had in view in employing the rhatany root. In several cases, then, of this state of the gut, attended with fissures of the anus, he found that he effected a cure, both of the constipation and the fissures, by administering in glyster, the extract of rhatany root, with the addition of a small quantity of the alcoholic tincture of the same.

Since the period when this mode of treatment was first made known, M. Trousseau has cured four cases, M. Marjolin one, and M. Berard, junior, two.

The mode in which M. Trousseau employs the rhatany root is the following. He administers to his patient every morning a glyster of marsh mallows decoction, or simply of water, with the addition of olive or almond oil, in order to clear out the intestines. Half an hour after the intestine has been emptied, he gives an injection composed of thirty-eight drachms of water; one to two drachms and a half of the extract of rhatany; and five drachms and a half of alcohol, which the patient is desired to retain, if possible. The same styptic injection is repeated in the evening.

When the pain is once moderated, only one glyster is given daily; and when the cure appears to be completed, every alternate day only, for a fortnight longer.

He says he has derived considerable advantage from the employment of an ointment composed of one or two parts of the extract of rhatany to five of the butter of cacao.—*Edinburgh Medical and Surgical Journal*, Jan., 1841.

NOTICE OF

HOSPITALS AND DISPENSARIES.

At present we do not intend to enter upon the details of the numerous charitable Homœopathic institutions of this country, but simply to notice their existence. In future Numbers, we hope to be enabled to give full reports of these various establishments.

In London, this year, an Hospital for the reception of patients laboring under acute diseases has been opened in Hanover Square, along with a Dispensary for the treatment of chronic cases. We are indebted to the liberality of Mr. Leaf for establishing this institution, which has been placed under the medical superintendence of Dr. Curie. The West London Homœopathic Dispensary was opened in 1841 in Newman Street, Oxford Street, under the directions of Drs. Belluomini and Dunsford. Another has this year been established in Lambeth, to which Dr. Laurie has been appointed. Another is just opened by Dr. Partridge in Marylebone. Dr. Partridge has also established a private Hospital or Sanatorium in Montague Street, Portman Square, for the treatment of individuals in moderate circumstances. We also hear that another Dispensary is about to be opened by Dr. Quin, to whom the honor is due of having introduced Homœopathy into England.

The Edinburgh Homœopathic Dispensary,

Spring Gardens, Stockbridge, was commenced in 1841, under the charge of Drs. Russell and Black. The first annual report of this institution has just been published.

A Dispensary was opened some years ago in Glasgow by Dr. G. Scott.

Liverpool Homœopathic Dispensary, 14 Benson Street. Physicians—Drs. Drysdale and Chapman. Patients are seen on Tuesdays, Thursdays, and Saturdays. The Dispensary was opened by Dr. Drysdale in a comparatively retired situation on the 25th November 1841; it was removed at the end of June 1842 to Benson Street. It is at present supported by the contributions and subscriptions of the benevolent friends and patrons of Homœopathy; but it is also intended that persons in moderate circumstances, who will not avail themselves of the Dispensary as a charity, may by annual subscriptions obtain advice and medicines for themselves and families. The following tables will show the progress that has been made:—

19	new patients were admitted in Dec. 1841.
29	. . . . . Jan. 1842.
33	. . . . . Feb. do
48	. . . . . Mar. do
54	. . . . . April do
74	. . . . . May do
74	. . . . . June do
57	. . . . . July do
101	. . . . . Aug. do
107	. . . . . Sept. do
139	. . . . . Oct. do

The number, it will be seen by this table, has been steadily progressive, excepting in June, when the Dispensary was removed from one situation to another, and in July, when the new situation was yet comparatively unknown.

252 patients were prescribed for in August.
 298 Sept.
 392 Oct.
 627 Nov.
 Total number admitted in November,—197.

So far as they have been ascertained, the results have been highly satisfactory; the different epidemics of the different seasons have been treated with marked success. Some of the very interesting cases on the records of this Dispensary we purpose to publish occasionally.

We believe, also, that there are private Dispensaries, under the superintendence of other Homœopathic practitioners, in London, Dublin, Bristol, Blackheath, Newcastle, Oxfordshire, &c.

HOMŒOPATHIC INTELLIGENCE.

We are very glad to learn, by a letter from Dr. Wurm, that there is an immediate prospect of a new Homœopathic Journal being established in Vienna. The names of those to whom it is to be confided are ample guarantees of the ability with which it will be conducted.

There are few recent testimonies more expressive of the deep scientific progress of Homœopathy than the fact, that, by an order of the Ministry of Brunswick, published in the *Allgemeine Zeitung* of Leipzig, April, 1842, Dr. Fielitz was appointed to examine in those branches of medicine which differ from the Allopathic school, all candidates for the degree of doctor in medicine, who wish to practice Homœopathically. This affords an interesting commentary to the following late decree of the Brunswick College of Medicine—*"That no student could receive his doctorate if he entertained the intention of practising Homœopathy;"* and more recently the College required pledges of the young doctors not to pursue the Homœopathic system.

THE HOMŒOPATHIC CONGRESS OF 1842.

This Congress first met at Köthen in 1829; it has since assembled annually, and the last meeting was held on the 10th of August, 1842 at Leipzig. Among those present were Drs. Rummel, Hartmann, and Stapf; Dr. Trinks of Dresden, Dr. Noack of Leipzig, Dr. Lobethal of Breslau, Dr. Mellicher of Berlin, Dr. Severin of Naples, Dr. Rapou of Lyons, and Dr. Hamilton of London. Dr. Müller of Leipzig was chosen President. In his opening address, among other topics, he animadverted strongly on the disingenuous conduct of many Allopathic physicians in Germany, who have not scrupled to denounce HAHNEMANN, and at the same time to profit by his discoveries. As an example, he mentioned a Dr. Kindervater of Burgdorf, who has recently celebrated the virtues of Aconite as a substitute for bloodletting in inflammatory affections, as if it were his own discovery, not adverting to the fact that it was recommended fifty years ago by Hahnemann, and has since been constantly employed by his disciples. The annual report of the Leipzig Hospital was then given by Dr. Noack. As we propose giving the full history of this establishment in the next Number of our Journal, we need not notice it farther here. Dr. Mellicher then read a narrative of the diffusion of Homœopathy over the kingdom of Naples, whence he had recently returned. The question of the propriety of the Homœopathic practitioners dispensing their own medicines was next discussed. This is a question of great interest in Germany, as many have had to suffer grievous hardships in that country by the rigorous enforcement of laws against the practice; and Dr. Rummel of Magdeburg would have been obliged to succumb or leave the place, but for the exertions of his eloquent champion the advocate Weizel, who excited universal indignation by exposing the injustice of wresting obsolete laws to op-

press a body of men, offensive only to their brother practitioners, who suffered by the superior success of the Homœopathists. The Homœopathic physicians of Prague were cited by the Austrian authorities, who, on finding it impossible to reconcile the existing laws with the prevalent practice, dropped the matter—wisely judging that good laws, made for the welfare of society, became bad, so soon as they could not be enforced without injustice; and that matters would right themselves when the Homœopathic system was generally acknowledged. The Manual of Homœopathy, now in progress by Drs. Noack and Trinks, was then spoken of. The opinion seemed to be, that it was rather bulky for a manual, but very valuable as a book of reference. We are very much gratified by knowing that this admirable work is being prosecuted, and we trust that it will repay, by its acknowledged value, the labor of its able and indefatigable authors. The meeting was very harmonious, and gave great satisfaction to all present. Dr. Trinks was appointed President of the ensuing Congress, and Dresden was fixed as the place of meeting.—*British Journal of Homœopathy*.

DOMESTIC INTELLIGENCE.

TO THE INSPECTORS OF THE STATE PRISON AT AUBURN.

GENTLEMEN,

Your attention is respectfully solicited to the following statement of facts, illustrating the comparative merits of the two systems of *Homœopathic* and *Allopathic* practice, in the Hospital of the State Prison at Auburn during the past year. In making this communication, I wish to be understood that nothing is intended in derogation to the practice of Dr. Pitney, as I consider it as an ordinary result of Allopathic practice.

The results are from the reports of the Inspectors of the prison, and their correctness may be relied upon.

What renders them particularly interesting is the fact, that they are the results of two consecutive periods of practice, by two physicians, neither of whom expected at the time that his practice would become matter of review, or a subject of comparison with the practice of another.

It is fair then to conclude, that as far as the test has been carried, it does equal justice, of which none has a right to complain :

HOMŒOPATHIA.	ALLOPATHIA.
From the 2d day of December, 1841, to the 3d day of April, 1842, during which period Homœopathic medicines were administered in all severe cases of hospital practice, the number of deaths was . . . none	From the 3d day, of April, 1842, at which time Dr. Pitney took charge of the hospital, until January 1st, 1843 the number of deaths was 7.
The hospital was left on the 3d of April, with no individual confined to his cot by sickness.	My successor had on the 1st January six confined with severe sickness, and others in the hospital.
BILL FOR MEDICINES AS PER REPORT.	BILLS FOR MEDICINE AS PER REPORT.
1841, November . . . none	1842, June, T M Hunt, \$14 80
" December, T. M. Hunt . . . \$2 77	" " R. Steel . . 7 57
1842, January, R. Steel. 14 12	" " R. Muir . . 1 50
" " R & M Watson (alcohol) 7 50	" July, R & M Watson (alcohol) . . . 7 50
" February . . . none	" " B. Fosgate 10 49
" March, T M Hunt. 18 23	" Aug. S. Sears . 1 50
" " R Steel & Co. . . 13 00	" " C. Reed . 11 38
" " B Fosgate. 10 50	" Sept. R. Gridley 41 07
" April . . . none	" " T M Hunt 49 90
" May, O. Reed . . 5 50	" " R. Steel 55 70
	" Oct. O. Reed . . 1 50
	" " J. Gridley 5 50
	" " B. Fosgate 10 31
	" " T M Hunt 19 18
	" " R. Steel . 31 63
	" " R & M Watson, (alcohol) . . . 14 00
Medicines in all for seven months, \$71 62; \$10 23 per month; \$122 76 per annum.	Medicine in all for five months, \$283 53; \$56 68 per month; \$680 16 per annum.

All of which is respectfully submitted by

Your humble servant,

E. HUMPHREYS, late Physician

to the Auburn State Prison.

Cayuga Tocsin.

THE
HOMŒOPATHIC EXAMINER.

BY

A. GERALD HULL, M. D.

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T H E

HOMŒOPATHIC EXAMINER.

No. 7.

APRIL—JULY, 1843.

VOL. 3.

ON THE

METEOROLOGY OF HEMORRHAGE.

BY
B. F. JOSLIN, M.D.,
OF THE CITY OF NEW YORK.

[We have the happiness to announce the name of the distinguished author of the following paper as an avowed accession to the ranks of Homœopathy.

Dr. Joslin, although ever practically devoted to the Medical Profession, is also engaged as a teacher of the Natural Sciences and Mathematics, having been Professor of these departments in Union College for many years, and holding the same honorable post in the University of New York at the present time.

His published essays on medical and scientific subjects have most justly given him an enviable standing as an accurate observer and as a modest original thinker. We remember with peculiar pleasure the impression made by his Inaugural Dissertation for the degree of Doctor of Medicine. His thesis on that occasion, "Radiant Heat," was so ably managed as to add a lustre to the ceremonies of the day, and to reflect much credit upon the class who

received their diplomas with him, of which we are proud to have been one. So much of this able paper as related to Provost's Theory is published in the "*Transactions in the Albany Institute*;" and subsequently Professor Joslin contributed a paper on the same subject to the "*Transactions of the American Philosophical Society*."

In 1832-3 he furnished to the Medical Society of this state a paper on "The Physiology of Respiration, and the Chemistry of the blood, applied to the epidemic cholera," which is to be found in the "*Transactions*" of that body, vol. 2. He also enriched the same journal with his celebrated "*Physiological Explanation of the Beauty of Form*," which was received with great favor by the Medico-Chirurgical Review of London.

The paper we give, which is selected as having an important connection with our modes of observation, is taken from the "*American Journal of Medical Sciences*." To this Journal Professor Joslin also communicated his "Cases of Paralysis successfully treated by Strychnine," which have, no doubt, effectually prepared him for the unhesitating avowal he now makes of the only rational theory of the operation of that great remedy.

Dr. Joslin has been for very many years a personal friend of ours, having been, as was stated, our classmate in the College of Physicians; he was also at first one of the Professors of the Institution at which our colleague, Dr. Hull, took his academic degrees, and sub-



sequently an intimate friend of the doctor ; and therefore we take no small share in the satisfaction which is felt by the members of our school in this state, at his accession to the ranks of Hahnemann. Dr. Bowers, of this city, a relative of Dr. Joslin, and a somewhat earlier convert to Homœopathia, has been associated with him in the practical investigation of this great question.

It is proper to say to the friends of the New Method, that Dr. Joslin's acquaintance with it, both theoretical and practical, is neither immature nor imperfect ; his patient and most careful habit of observation, and his very unusual amount of scientific acquirement, have made him an apt and severe student of its principles and practice. To this we can add that his zeal for the true advancement of our beneficent art will ever keep him in the front rank of its real laborers.

With such men as Hering, Joslin, Channing, Neidhard, Kitchen, Lingen, Green, Okie, Peters, and a host of converts of highly meritorious attainments and character, we have every thing to hope—nothing to fear for the sound progress of Homœopathy in the Western World. From information we have received since our last number made its appearance, we are able to assure the friends of our cause that some very important new arrangements of the *Materia Medica* are in progress, which cannot fail to fill them with an unlooked for pleasure. We need not name Hering as the author !]

Medical and meteorological studies bear some resemblance to each other in the complexity of the subjects and the difficulty of establishing complete and comprehensive theories.

Medical meteorology combines difficulties inherent in both classes of sciences ; and though destined at some future time to be a

science of great interest and importance, it is at present, and is perhaps for a considerable period longer to be, in a condition which may be termed fragmentary.

In the hope of adding a fragment to those already collected, I have endeavored to examine a limited portion of this extensive field.

The object here proposed is to examine among the various causes whose combined influence determine the time when a spontaneous *hemorrhage* shall occur ; whether the condition of the atmosphere has an influence so great as to be detected by a careful comparison of medical and meteorological observations.

In the course of a medical practice of fifteen years, and the daily observation and record of meteorological facts during the greater part of this time, the writer has become so far convinced of the existence of such an influence, as to induce him to undertake the labor of making a numerical estimate for obtaining the average results in relation to a considerable number of cases.

The examination has been restricted to cases of hæmoptysis and uterine hemorrhage occurring in his own practice, and from lack of time, and the great labor required for calculating the mean meteorological results for all the months and years up to the present time, those three continuous years in which the meteorological observations were more nearly complete, have been selected. This period ended in May, 1837. The locality was Schenectady, New York.

Of the cases of hæmoptysis and uterine hemorrhage scattered through these three years, those only have been selected whose date was recorded ; they amount only to fifty-four. In two or three of the cases selected, there may be a slight uncertainty as to the day of attack, but in nearly half of them the hour of attack was recorded.



A few remarks may be indulged in respect to the rules and principles by which the estimate was made.

The selection of cases has been determined solely by the degree of evidence as to the exact day or hour of attack ; and to avoid any bias from preconceived opinions, the selections have been made previously to consulting the meteorological journal. In but one instance has an exacerbation, or an attack within two days of a previous attack of the same patient, been included.

The mean dew-point of each day of attack has been selected as the dew-point for the time, and compared with the average for the corresponding month. As the changes of *season* have comparatively little influence on the mean monthly atmospheric pressure, the mean height of the barometer for the corresponding *year* has been taken as the standard with which to compare the height as observed at the hour nearest that of the attack, or, in case of uncertainty as to this, the mean height of the day. For times when this instrument was exposed to considerable changes of temperature, a correction for temperature has been generally made. In regard to rain or snow, where either the hour of its occurrence or that of the attack was unknown, there no attempt has been made to arrive at the probable *fractions* of the day.

No attempt is here made to distinguish between the effects of rain and those of snow. Indeed, this distinction for all purposes of medical meteorology, is frequently more apparent than real. What falls as rain at the earth's surface, is frequently, the product of melted snow. Meteorologists seem rarely to reflect on this fact, but, on the contrary, erroneously attribute the formation of snow to the congelation of clouds or of rain. For want of a more appropriate word in our language to express the descent either of snow or rain, the

term storm, or falling weather, will be sometimes employed ; and those days will, for the sake of brevity, be called stormy days, on any part of which rain or snow fell.

For the purpose of examining the influence of rain and snow, and of the barometrical and hygrometrical conditions and changes of the atmosphere, the tables have been arranged in fourteen columns. The first shows the number of the case and the date of attack ; the second column shows the number of stormy days immediately preceding each day of attack or commencement of hemorrhage ; the third the number of the days immediately succeeding the day of attack ; the fourth column the proportion of stormy days in the corresponding month, expressed in hundredths, the whole number of days in the month being taken as unity ; the fifth column the number of days (and fractional parts when known) between the commencement of the hemorrhage and the nearest preceding day, or part of day, of storm ; sixth, the number of days which elapsed between the time of attack and the next succeeding storm. Hence O in both these columns signifies that the storm existed at the hour, or at least on the day, of attack. The seventh exhibits the condition of the atmospheric pressure on the day, and as near as practicable, on the hour of attack, as compared with the pressure twenty-four hours previous. The eighth exhibits the same thing for the time of attack ; *i. e.* shows whether the barometer was rising, falling, or stationary, according to the evidence afforded by the next succeeding as compared with the next preceding observation of the same day. In the ninth and tenth the barometer is compared with the mean, in terms of hundredths of an inch, above or below. The eleventh column exhibits the dew-point on the day of attack ; the twelfth the mean dew-point of the month ; the thirteenth the difference between the dew-point and temperature of the air for the day, and the four-

teenth the same for the month. All the columns are complete except those for dew-point, which could not be conveniently obtained for the colder months. This has been given for thirty-three cases. The first table exhibits the results for uterine hemorrhage, and the second for hæmoptysis.

Results. Season and temperature. In examining the results let us first inquire the influence of season. The months in which the greatest number of cases occurred were June and September, hæmoptysis taking the lead in the former, and uterine hemorrhages in the latter. It would seem that neither the extreme of heat nor that of cold is among the most influential causes. Whether change of temperature at the time has an influence, is a different inquiry; and by examining the dew-point, and the difference between it and the temperature, it is seen that some depression of temperature is a usual concomitant of hemorrhage. The average depression of the thermometer below the monthly mean was 3° , but the fall was greater for hæmoptysis.

The hygrometrical state of the air may be next examined; first, in relation to the dew-point, which affords a measure of the absolute quantity of contained vapour; and secondly, in relation to the difference between the dew-point and temperature, which affords a measure of the degree of dampness, in other words the degree of approximation to the point of precipitation.

Now the average dew-point for the whole collection of cases is about 3° below that of the corresponding months. The air then, at the earth's surface, contained less than the usual amount of vapour. We are not to conclude that the air possessed a more desiccating quality; for the average difference between the dew-point and temperature (taking into account the relative number of the two kinds of cases) differed but one-tenth of a degree from the monthly mean. The average dampness

for each class of hemorrhage was near the usual standard, but was rather greater for hæmoptysis. As the average dampness for both classes collectively was almost exactly the same as that for the corresponding months, there is no evidence that dampness *per se* has any influence on hemorrhage. As to the absolute height of the dew-point, there was a close agreement between the two classes, each giving (within one-third of a degree) a difference of 3° from and below that of the month. Here then, there is something which appears to be conducive to hemorrhage in general, but when we recollect that there was a corresponding depression of temperature, which leaves the dampness unchanged, and also that great cold has of itself little predisposing influence, we become, in the present stage of the inquiry, restricted to the conclusion, that that atmospheric agency, which conduces mainly to hemorrhage, is neither dryness nor humidity, nor heat nor cold, but some change or condition—whatever it be—which, on an average, is attended by a reduction of temperature and such a corresponding diminution of vapour as leaves the degree of humidity nearly unchanged.

Atmospheric pressure next claims attention, being, like temperature and humidity, one of the less complicated phenomena, and the subject of instrumental measurement.

The barometrical results were more remarkable than the thermometrical or hygrometrical ones, and very different in some respects from what generally received opinions would lead us to anticipate.

If we regard the average changes of pressure during the twenty-four hours preceding the time of attack, we find nothing remarkable, unless it be a remarkable want of influence, shown by a strict conformity to what the theory of probabilities would require for the average results of accidents in a numerous collection of cases. In other words, the instances

in which the barometer was rising were nearly equal to those in which it was falling; and this correspondence extended to both tables. Before the uterine hemorrhages, the barometer was rising 13 and falling 14 times: and before hæmoptysis, the proportion was also 13 to 14. This shows, if any thing, a slight tendency to depression, but not sufficient to justify any general conclusion for this number of cases.

The case is different for the days of attack. On those the barometer was generally falling, and in a greater proportion of instances than could, with any probability, be attributed to accident. Out of 54 cases, it was in 35 falling at the time of attack, in 18 rising, and in 1 stationary.

Hence the probability that the atmospheric pressure shall be diminishing rather than increasing at the time of an attack, is about as TWO TO ONE. A confirmation of the opinion that the barometer will generally be found falling at or near the commencement of a hemorrhage, is found in the fact that the proportion was almost exactly the same for both classes of hemorrhage, being 17 to 9 for the uterine, and 18 to 9 for the pulmonary. It is difficult to believe that this falling of the barometer was accidental, when the proportion was so great and so nearly correspondent for both kinds of hemorrhage.

If this great influence of a diminution of atmospheric pressure be mechanical, we should be inclined, *à priori*, to anticipate that the effect would be at the maximum when the pressure was at a minimum, and the blood vessels in an unusual degree deprived of this external and mechanical support.

But it is interesting to notice, that the facts exhibited in another column contradict such a conclusion. The barometer, though generally *falling*, is *not low*, but on an average about one-third of a tenth of an inch *above* the mean height for the year. That the existence

of some excess above the mean was not the accidental result of a moderate number of cases, appears probable from the fact that the two classes of hemorrhage differed in this respect from each other; only about one-fourth part as much as one of them differed from the general average of the year.

Instead of the number of times above and below, the average height has been selected, as being less liable to vitiation by errors as to the exact time of attack, or the exact barometrical heights, whether mean or particular.

If we select those cases which are unexceptional as to the reliance on small differences, for example, those whose exact hour of commencement was known, and was between sunrise and 10 o'clock, P. M., between which times the barometer was consulted, we find it to have averaged about one and a half tenths above the mean, for each class of hemorrhages, and for each to have been two or three times as often above the mean as below it. The range was from only a twentieth of an inch below, to more than a third of an inch above.

From all the barometrical facts we may draw the conclusion, that at the commencement of hæmoptysis or uterine hemorrhage, *the barometer is generally falling*, and from *some points above the mean*. There would seem to be in general, some influence predisposing to hemorrhage, between the time of maximum and medium height, for that section of the month in which the attack occurs.

Falling weather remains to be examined. A storm of rain or snow is a complex phenomenon, and involves changes in those more elementary ones which have hitherto engaged our attention. It is generally preceded—frequently at an interval of some days—by an increase of atmospheric pressure, and a diminution of the dew-point; but, as the storm approaches, all these usually approach the mean, and pass to the other side before or after its

commencement. It will be perceived that the state of things so far examined, which gives the hemorrhagic tendency, seems usually to agree with some part of this transition period.

Let us see how far this conclusion conforms to the observation on the times of hemorrhages and storms.

In the first place, the average time to the nearest preceding day of failing weather exceeded that to the nearest succeeding day; and, if we exclude the storms which occurred on the days of the hemorrhage, the average distance between the nearest past and future storms was about three-fourths of a day; the difference being, however, greater for uterine hemorrhages. The mean results at the feet of the tabular columns are deduced by including the stormy days on which hemorrhages occurred, which gives a less absolute distance, but the same disproportion between the distances to past and future storms; the ratio being as 35 to 26, for both classes of hemorrhages collectively. The disproportion is seen to be less for hæmoptysis than uterine hemorrhage, but the balance decidedly on the same side.

We see the same tendency by examining, in a different way, the number of times in which the nearest storm occurred after the uterine hemorrhage was to that in which it occurred previously, as 10 to 2. The proportion for hæmoptysis was 12 to 7, and for the hemorrhages generally as 22 to 9. The disproportion between the intervals to the past and future storms would have been found still greater, and the above ratios also nearer to each other, had we excluded from the estimate those storms which were three or more days distant, and which on that account may be presumed not to have exerted a sensible influence.

These facts tends to the conclusion, that atmospheric condition of *the period preceding a storm* is more conducive to hemorrhage than that which immediately succeeds one.

A confirmation of this conclusion is found by comparing three days which immediately precede the hemorrhage with the three which immediately succeed it. For the proportion of the former, which were stormy, was, for both kinds of hemorrhage collectively, only $36\frac{1}{2}$ per cent., that of the latter $51\frac{1}{2}$. The disproportion was greater for the uterine and less for the pulmonary, but still the balance was on the same side.*

Moreover, the hemorrhages usually occurred at the conclusion of several days which had presented less than the usual amount of falling weather. The proportion of days of rain and snow for the corresponding years was 44 per cent., for the corresponding months 45 per cent., and for the three-day periods preceding the hemorrhages $36\frac{1}{2}$ per cent.; for the three days preceding uterine hemorrhages 33, and for the three days succeeding them 59 per cent. Thus it was eminently the case with uterine hemorrhages, that they were *preceded* by an unusual amount of dry and fair, and *succeeded* by an unusual amount of foul, weather, the succeeding and preceding stormy days being to each other nearly as two to one.

We may conclude then, first, that the time of an attack of hæmoptysis or uterine hemorrhage is usually farther removed from the nearest preceding days of falling weather than from the nearest succeeding ones. It may be expressed by saying, that the attack is oftener *before* a storm than *after* a storm. Secondly. The stormy days which precede the hemorrhage are usually less numerous than those which succeed it, and indeed less numerous than for the same length of time in other parts of the corresponding month. Both these remarks are more strikingly exemplified in cases of uterine than in those of pulmonary hemorrhage.

* The separate results may be seen in columns second and third of Tables I. and II.

On reviewing all the meteorological circumstances, we see the mean results, whether barometrical, thermometrical, or hygrometrical, all conspiring to point to a time of *transition* from a fair and *dry*, to a more foul and *stormy* period, or at least to the time characterised by great electrical changes, and especially to the developement of much free electricity in the upper regions of the atmosphere, by the precipitation and even crystalization of aqueous vapour. That an electrical, or what may even be termed, in many cases at least, a magnetic influence, and one which operates at a distance is one of the most influential of the

morbific agencies concerned in the above results, I am strongly inclined to believe.

As the stages of disease and various internal and external circumstances must contribute to determine the precise time of an attack of hemorrhage, the scientific physician will not be surprised at the want of correspondence between the meteorological and medical results in many particular instances, but will be led by the former considerations to admit the reality and appreciate the importance of atmospheric agencies which, in spite of all other disturbing influences, still manifest themselves in the average results.

TABLE I.—UTERINE HEMORRHAGE.

Number of Case.	Time of attack.	Number of days of rain or snow in three preceding days.	Number of days of rain or snow in three succeeding days.	Proportion in corresponding month.	Time to first preceding rain or snow.	Time to 1st succeeding rain or snow.	Barometer in preceding twenty-four hours.	Barometer at time.	Barometer compared with the mean.		Dew point for the day.	Dew-point for the month.	Diff. between dew point and temp.	Difference for month.
									above	below				
1834.														
1	May 29, A. M.	0	2	.51	deg.	deg.	F.	F.						
2	June 8, 11 A. M.	1	1	.40	3	2	F.	F.		20	50	42	6	16
3	October 11,	1	1	.35	2	2	R.	F.	38	3	58	56	19	10
4	Nov. 6, morning,	0	2	.37	9	2	R.	R.						
5	December 23,	2	3	.51	3	1	R.	R.	23					
1835.														
6	April 2,	1	2	.53	0	0	F.	F.		28				
7	July 7,	2	2	.48	2	1	F.	F.		17	64½	62	9½	8
8	September 12, P. M.	1	2	.33	0	0	F.	F.	0	0	48	47½	9½	7
9	September 30,	1	2	.33	2	1	F.	F.		23	35	47½	9	7
10	October 5,	2	2	.29	0	0	R.	F.		5	46½	44½	2	5½
11	October 14,	0	0	.29	7	5	F.	F.	17		46	44½	4½	5
12	November 9,	2	2	.60	2	2	F.	F.		6				
13	Novem. 11, 3 A. M.	0	3	.60	0	0	F.	F.		69				
14	Novem. 14, 9 P. M.	3	2	.60	0	0	R.	R.	12					
15	Decem. 4, evening,	1	2	.48	0	0	F.	F.		8				
16	December 11,	2	2	.48	2	1	R.	F.	59					
1836.														
17	January 15, 4 P. M.	0	2	.48	0	0	R.	R.	4					
18	February 6,	2	2	.48	2	1	R.	R.	23					
19	February 13, P. M.	1	0	.48	0	0	F.	F.		13				
20	April 5,	0	0	.43	3	4	R.	R.	14		13½	30	10½	9
21	September 9, 3 P. M.	0	3	.50	0	0	F.	R.		2	51	52½	7	8½
22	Sept. 9, early A. M.	0	3	.50	4	½	F.	S.	0	0	51	52½	7	8½
23	Septem. 22, 2 P. M.	0	3	.50	0	0	F.	F.	6		59	52½	5	8½
24	Sep 28, 29, midnight	1	1	.50	1	3½	R.	R.		18	33	52½	10	8½
25	October, 10, 9 P. M.	1	2	.55	3½	1½	R.	R.	37		27½	34	8	5
26	October 29,	1	0	.55	0	0	R.	R.		7	22½	34	15½	5
1837.														
27	February 5,	2	2	.46	0	0	R.	F.	44					
Averages, - -		.33	.59	.46½	1.69	1.01	F. 14 R. 13	F. 17 R. 9 S. 1	Sum. 300 Mean 11	Sum. 219 Mean 8	43.3°	46.6°	8.9°	8°

TABLE II.—HÆMOPTYSIS.

Number of Case.	Time of attack.	Number of days of rain or snow in three preceding days.	Number of days of rain or snow in three succeeding days.	Proportion in corresponding month.	Time to first preceding rain or snow.	Time to last succeeding rain or snow.	Barometer in preceding twenty-four hours.	Barometer at time.	Barometer compared with the mean.		Dew-point at time.	Dew-point for month.	Diff. between dew-point and temp.	Difference for month.
	1834.				deg.	deg.			above	below	deg.	deg.	deg.	deg.
1	May 20,	0	1	.51	0	0	F.	F.	15		50	42	6	16
2	June 13,	1	1	.40	0	0	F.	F.		11	50	56	8	10
3	June 18,	2	2	.40	0	0	F.	F.		34	53	56	3	10
4	June 19,	3	1	.40	0	0	F.	R.		37	59	56	3	10
5	June 23,	1	1	.40	2	1	F.	F.		12	61	56	15	10
6	June 28, early A. M.	0	2	.40	0	0	F.	R.	10		52½	56	12	10
1835.														
7	March 4,	0	1	.29	4	3	R.	R.	54					
8	May 1,	2	1	.35	2	3	F.	F.		12				
9	May 4,	0	2	.35	0	0	F.	F.		19				
10	June 25, 3 A. M.	1	2	.53	2½	½	F.	F.		20	57	53	10	15
11	September 18,	0	3	.33	4	1	F.	F.	17		54	47	6	8
1836.														
12	April 7,	0	1	.43	5	2	R.	F.	23		20	30	9	9
13	June 24, noon,	2	3	.57	0	0	R.	F.	10		51	57½	10½	7
14	June 27, 5 P. M.	3	2	.57	½	1	F.	F.		5	58	57½	6½	7
15	July 18, P. M.	0	1	.35	4½	2½	R.	F.	23		54	60	12	11
16	July 18, 4 P. M.	0	1	.35	4½	2½	R.	F.	23		54	60	12	11
17	July 23, 2½ A. M.	2	1	.35	1	1½	R.	F.		15	54	60	8½	11
18	Sept. 29, 3 A. M.	1	1	.50	1	3½	R.	R.		16	31	52½	11½	8½
19	Sept. 30, 10 P. M.	1	2	.50	2½	1½	R.	F.	18		37	52½	8½	8½
20	October 7,	3	0	.55	0	0	R.	R.		8	37½	34	7½	5
21	October 9, 10 P. M.	2	1	.55	2½	2½	R.	R.	29		33	34	7	5
22	October 10, 6½ A. M.	1	2	.55	3½	1½	R.	R.	32		27½	34	8	5
23	November 2, 7 A. M.	0	0	.47	4½	8½	F.	F.	0	0				
24	Novem. 27, 9 A. M.	3	1	.47	½	2½	R.	R.	6					
1837.														
25	February 9.	2	1	.46	1	3	R.	F.	24					
26	February 10, 9 P. M.	1	1	.46	2½	1½	F.	R.	13					
27	April 30, 7 A. M.	1	1	.40	0	0	F.	F.		4				
Averages, - -		.40	.44½	.44	1.78	1.61	F. 14 R. 13	F. 18 R. 9	Sum. 297 Mean 11	Sum. 193 Mean 7	47. 3°	50.2°	8.6°	9.3°
													Mean	Mean

ACCIDENTAL POISONING BY NUX VOMICA.

A boy four years old, took against *Ascarides*, instead of a quarter of a grain of the watery extract of *Nux Vomica*, four grains every three hours.

After the first powder, 6 o'clock, A. M., he had vertigo, nausea, and vomited. To this, however, no attention was paid. After the second powder, anxiety, restlessness, torsion of the eyes, purple colour of the face, cold ex-

tremities, every three or six minutes a paroxysm of horrible convulsions of the whole body, catalepsy, with opisthotonus, contraction of the abdominal muscles, loss of consciousness, the limbs cold and muscles hard, face of a cherry colour, respiration impeded, and convulsive motion of the facial muscles.

These paroxysms would last a minute, after which the extremities would regain their flexibility, and respiration would proceed normally.—*Mosts Denkwürdigkeiten*, I. 147.

TRAUMATIC OPISTHOTONOS,

BY

H. G. DUNNEL, M. D.,

NEW YORK.

Martha Hendrickson, aged fourteen, residing at 31 Avenue D, of a bilious temperament,—not yet menstruating—wounded the bottom of the left foot, twelve days before I saw her, with a broken bottle. The wound was about half an inch in length, situated near the centre of the foot, about the junction of the tarsal and metatarsal joint. The following statement was obtained from the mother.—The wound bled four or five hours very freely, and was stopped with great difficulty. It caused no great pain or uneasiness, but for a week past she has complained of pain in the back, upon moving, and a gradually increasing sore throat, to which she is subject, and which therefore caused no alarm; she had a crack in the skin of one of the toes of the right foot, which was accompanied by a redness of skin in the course of the absorbents of the foot and leg quite up to the knee. She had been going about the room several days on her knees, and would not be carried to bed. Day before yesterday labored under frontal cephalalgia, pale face, and frequent chills; yesterday took a dose of Sulph. Magnes., and flannel was wrapped around the throat.

At five o'clock this morning, the mother was awoken by moaning and cries from the patient, soon followed by a general shudder, or horripilation; violent retraction of the head, and fixedness of the jaw, with inability of swallowing; the tongue had been several times darted between the jaws and wounded. The family

physician, Dr. Benjamin Bailey, was immediately sent for, warm poultices were applied to the wound, and sinapisms to the neck.

At half past ten A. M., of Sept. 16th, 1842, I first saw her: the countenance was pale, skin cool, pulse 98, and small, composed, mind clear, no alarm, head violently retracted, lower jaw fixed at a quarter of an inch from the other in front, Dysphagia, Dyspnœa. The head can be brought forward gradually, if properly supported; it will remain so, however, but a moment before it is recurvated. Back and loins painful, stiff—the pains are not now, as they have been, relieved by rest, and encreased by motion; they are constantly severe. The bowels have been twice moved during the night. As the understanding with the physician is that the patient is to be under my charge, through him, I gave Bell. $\frac{0.00}{1}$, in Aqua. $\mathfrak{z}\text{ij}$. a teaspoonful every two hours.

9 P. M. The spastic contractions became more frequent until 6 P. M., when there occurred a paroxysm which lasted half an hour. There is great pain and tension of the precordia, and suffocation; mucous, frothy, accumulation in the throat; flushed countenance; Sardoniac grin, appears frightened; the least touch, attempting to drink, or any slight sudden noise, produces the contractions; pulse fuller, softer; skin warmer; bowels twice moved again. Discontinued Bell., and Tinct. Arnica to be applied to the wound.

17th. 10 A. M. Dr. A. Freeman saw her with us. She has less violent paroxysms, disposition to sleep during the intervals; has bitten the tongue several times again, even while asleep; uniform heat and moisture of the skin, attended with slight chilliness; does not appear to suffer so severely during the cramps. Sacc. Lact. continued.

9 P. M. Dr. Freeman present—recurrence of increased spasms, the whole body recurvated, resting upon the heels and occiput. Cicut. $\frac{0.00}{30}$, were given at a dose.

18th. 9 A. M. At 3 A. M. there were greatly increased spasms, which have since become less frequent and forcible. Stram. $\frac{0.0}{8}$, Bell. $\frac{0.0}{1}$, each dissolved in Aqua ζ ij., and téaspoon doses to be given alternately.

5 P. M. More violent paroxysms of contractions, have lasted 35 minutes at a time; loud shrieks; Dysphagia greatly increased; suffocation intense; complete opisthotonos; spastic contractions of the muscles of the arms, and even the fingers. Discontinue the medicine and give Sacc. Lact.

9 P. M. The intervals of repose lengthened.

19th. 9 A. M. Longer intervals of repose; has slept since we saw her, at intervals, until 4 A. M., when a severe paroxysm occurred; the contractions of the back are much lessened; the muscles of the neck are most severely affected.

The dysphagia is less; but the painful sense of constriction of the epigastrium and precordia towards the back with a sensation of instant suffocation, is either increased, or rendered more prominent by the diminution of the other cramps. Continued Sacc. Lact.

1 P. M. The opisthotonos diminished in duration. The distress under the sternum, and constrictions affecting respiration are most intense.—The attendants are busy continually fanning the air about her—the patient, on a cot bed, lies with the feet near the floor, the legs are more flexible, and when the respiratory difficulty arises, which it does upon the slightest disturbance of any kind, or attempt to swallow or speak, she is able to thrust her feet into a chair at the foot of the bed—insists upon lying in this situation, as the easiest to avoid or endure the cramps. Mosch. $\frac{0.0}{8}$.

10 P. M. Had a very severe exacerbation of cramps, and difficulty of respiration, at 6 P. M. The cramps of the legs and arms are quite gone; they mostly affect the anterior and posterior muscles of the neck, but are milder and shorter; expresses relief, talks

with less difficulty; slight lateral incurvation of the left side, which side is elevated when the paroxysms occur while the right side touches the bed; contractions severe in the upper and interior third of the thighs and pelvic region; bowels not moved since day before yesterday; urinated yesterday, at half past 12. It appears the patient, hearing us make such particular enquiries as to the duration of the cramps, caused the attendants to time them, and the result was 17, 15, 10, 11 minutes, and running down until now they do not last 2 minutes.

20th. 9 A. M. Evident amelioration; sleeps quietly, by half hours at a time. Cramps of the legs and arms quite gone; mostly now, of the neck, and retraction of the head.

10 P. M. Spasms frequent, shorter in duration; thirst intense; jaw relaxes a little in sleep; has slept an hour at a time since 2 P. M.; does not cry so piercingly with the cramps; no evacuations, pulse 120, has talked more to-day, begs to have the cool wash on the foot. A warm poultice was applied to it to-day, she begged to have it off, and since then she tells them, if they put it on again they will certainly choke her. Arnica flowers, steeped in, and kept wet with cold rum, were applied to the wound, and Cocc. $\frac{0.0}{24}$ was given.

21st. 9 A. M. Very restless until 2 A. M., when she fell into a sleep that lasted until half past 3, awoke with spasms that affected the whole body; the elbows, fingers, and toes, even, were cramped for about two minutes—fell asleep again, for three quarters of an hour after 4 o'clock; says she can swallow as well as, but not better than before; urinated freely, at half past 8 A. M., head recurved, urgent thirst, no foaming or frothing at the mouth, the Levator anguli oris muscles peculiarly acted upon and contracted, intense itching of the rim of the ear, intense pain, of short duration, in the left temple, had a chill or shudder soon after waking from the first sleep this

morning, says she feels no pain, except about the umbilicus, pulse 88.

10 P. M. Cramps, not long in duration, all day ; the tight cord across the throat that almost chokes her, came again to-day about 4 P. M., the same time as yesterday ; cries urgently to be fanned, pulse 86, skin cool, sleeps quietly except roused by dreams, and starts, but is calmed down by a word from the attendants, and sleeps again ; complains of soreness of the body. Arnica $\frac{0}{8}^0$.

22nd. 10 A. M. Great exacerbation since 4 A. M. ; previously had rested some ; grasps hold of the attendants for support ; does not require the back elevated so often from the bed—great thirst, and itching over the body. Says she is better ; if it were not for the band across the throat that chokes her, should be quite well ; but this causes the cramps, and they start from there and go all over the body, and they are better than they have been—rested and slept two hours at a time in the fore part of the night. Op. $\frac{0}{8}^0$.

10 half past, P. M. Has passed a more comfortable day than yesterday ; slept two hours at a time, easy and sweet, except occasional twitches ; suffocation not as intense ; great thirst ; bowels unmoved, Arnica $\frac{0}{1}^0$.

23rd. 10 A. M. Dr. Freeman present. Very comfortable since 2 A. M. Slept from three to five hours steadily, complained of being cool. Dysphagia and Dyspnoea very much relieved. Says her "back, neck, jaws, stomach, tongue, lips, face all ache, are all strained, and when cramped is cramped all over." Wants something to eat. The muscles of the throat and neck are violently constricted, the jaw does not open to exceed half an inch. She cannot swallow beef tea it sticks in her throat, and all and every kind of warm drink throughout the whole course of the disease, have instantly caused the cramps, and cannot be swallowed.

10 P. M. This morning about 11 A. M., Dr. Theodore Cornell, a gentleman residing in the

neighbourhood called in upon my invitation, and although she was well acquainted with him, it caused an alarm and panic with a return of the Opisthotonos as severe, and the attendants say more severe than ever. She has now Opisthotonos, joined to Pleurosthotonos of the left side, presenting a singular distortion of the body, and have continued almost incessant since that time. Laches. $\frac{0}{3}^0$, in Aqua. $\frac{3}{4}$ ij., a teaspoonful every hour.

24th. 9 A. M. Since 4 A. M., slept an hour at a time ; intense thirst, can swallow nothing but cold water, or water in which cake is soaked ; sleeps except the cramps rouse her ; she starts as if alarmed, when a word from the attendants, that apprises her they are there, stills her ; she is constantly fanned ; anxiety of respiration, and intense suffocation—violent Opisthotonos at intervals—constant Pleurosthotonos. Pulse under 80 and soft, great itching ; no evacuation of fæces or urine, Mosch. $\frac{0}{3}^0$.

2 half-past, P. M. Some subsidence of suffocation, great cramping of the legs and abdomen. The bowels have been moved by enema of sweetened water and salt and she has urinated, Nux. $\frac{0}{3}^0$.

10 P. M. Opisthotonos very frequent, short duration, not so severe ; constant Pleurosthotonos of the left side, Angust. $\frac{0}{8}^0$.

25th. 9 A. M. The cramps continued until about 12, when she fell asleep for near an hour, a little before 3, slept again until 5, remains very quiet : has been laid up in the bed upon her back, evident, positive, relief ; the jaw falls considerable when asleep, and is not jerked shut so violently when she wakes ; says she can move her mouth and jaws better. Bowels and bladder normally evacuated, Angust. $\frac{0}{8}^0$.

9 P. M. Continued with only two severe paroxysms until 6 P. M. when they returned and extended over the whole body ; the intervals are now lengthened, but she has had severe Opisthotonos and Pleurosthotonos a great part of the time since, complains greatly of

pain in the right shoulder and small of the back, Nux. $\frac{0.0}{8}$, and at 2 A. M. is to have Bell. $\frac{0.0}{1}$.

26th. 9 half-past, A. M. Has slept well from 2 to 3 : at intervals since, cramps chiefly in the back and loins ; has had them this morning in the abdomen. Dyspnoea, not intense ; has urinated. Opisthotonos and Pleurothotonos not severe at 1 P. M., Op. $\frac{0.0}{8}$.

9 half-past, P. M. Has felt more relieved this day, than any before, has slept up on the bed level, at long intervals ; the jaw in sleep is more relaxed, and she seems to have some control over it ; the loins and nape are cramped, but not so forcibly recurvated—intense pain and soreness of the right shoulder : insists it is broken, feels a plug, or lump in the throat, preventing deglutition ; asks for food, but will have nothing except drink—intense itching, tettery eruption over the back especially ; has uniformly been worse 2 or 3 hours before midnight ; the contractions come on and relax now, more gradually, they used to come in jerks ; requires fanning much of the time ; but the atmosphere is oppressive—voice faint—pulse 80, soft, small—urinates freely. Laches. $\frac{0.0}{8}$.

27th. 9 A. M. Rested better since 3 this morning, about two hours at a time, feels relieved, drinks better, has eaten some custard, asks for more, jaws partially relaxed back, slightly recurvated, lips very red. Dyspnoea relieved, pulse 110, has urinated.

9 half-past, P. M. Sleeping when we entered, not so easily roused, rested more than any day previous, has had only 3 or 4 paroxysms of contractions to day, countenance composed, pulse 85, skin warm, soft. Dysphagia less, has eaten freely of custard, jaws relaxed greatly while asleep and she opens, and closes them moderately when awake, thirst and suffocation not so urgent, slightly recurvated, the lump still severe in the throat, Cuprum. $\frac{0.0}{30}$.

28th. Has passed the most comfortable night since her illness, occasional slight con-

tractions ; not in jerks the back most affected, complains less of the round balls in the throat that impede swallowing, the jaw is still fixed, very hungry, although they have given her food very freely, has urinated.

9 P. M. Resting quietly most of the day, slight contractions not oftener than once an hour, slight recurvation, head level most of the time, jaw slightly relaxed during sleep, is moderately elevated by the assistants, and instantaneously laid down again, once in a while has to be brought over the foot of the cot, several times to day has lain with the knees bent and partly drawn up, complains of her legs and elbows being numb, crosses her hands upon the body, and interlaces the fingers, which she could not do before ; has eaten nearly a pint of custard, calls for ice cream, suffocation not intense, pulse 86, soft and jerking, lips red, countenance composed, has urinated twice.

29th. 9 A. M. Has rested 2 or 3 hours at a time, the contractions are slight, and at long intervals, jaws moderately fixed ; says it is from stiffness not cramp ; mucous rale in the trachea, a lump half way to the stomach rolls up in to the throat and chokes her when attempting to swallow ; or empty deglutition produces a very audible clucking sound, pulse 90, feeble, skin soft and of natural warmth, Assa. $\frac{0.0}{30}$.

10 P. M. Her sleep seems profound, but she has tremulous movements and jerks in her sleep, and is more frequently disturbed with the cramps to night than last night. This is the usual time for exacerbation, great sensation of hunger and emptiness of stomach. I am fearful from her action of a return of the cramps and gave Laches. $\frac{0.0}{6}$.

30th. 9 A. M. Very comfortable after 2 this morning, the pain of the throat is now the most troublesome symptom to her ; the Dyspnoea almost gone, is extended quite straight and level in the bed, disposed to sleep.

9 P. M. Bowels evacuated of themselves,

the feeling of a lump rolling from the stomach to the throat, and as if the whole body had been stretched, is annoying, she is very subject to *Cynanche tonsillaris*, pulse 98, gave Bell. $\frac{9}{12}$.

October 1st. 9 A. M. Not so quiet as could be wished, aroused by cramps between 1 and 2 this morning, pulse 80-90, has not slept so well, clucking in the throat very annoying, bowels twice normally evacuated and urinates freely.

1 P. M. There is great rigidity of throat and neck, I will try to overcome it by Stram. $\frac{000}{90}$.

9 P. M. Sleeping generally, has been so since 6 P. M. most of the time, the rigidity of neck is evidently less, lies level in the bed, the head slightly curved to the left, the clucking upon deglutition not so severe.

2nd. 9 A. M. Kept from 2 to 3 this morning awake a few minutes, and then slept until 6 A. M. Back very sore and lame, less dysphagia.

9 P. M. Quite comfortable all day, more so than ever, pulse quick, head now on a line with the body.

3rd. 10 A. M. Very comfortable all night and this morning, great soreness and lameness of the body, that requires her to be moved once in a while, which both rests and then tires her, Tox. $\frac{000}{12}$.

4th. Rested well ever since yesterday morning, moves the right leg a little; the uneasy tension of the back is eased by lifting her up, and immediately laying her down again.

5th. 10 A. M. Quite comfortable all day; less soreness; has raised her left hand to the eye; dyspnœa and dysphagia relieved; feels tired; is often raised up; tried to be elevated in bed, and a chair behind her; her right hip joint would bend, but not the left. The jaw falls quite open when asleep, is very close and tense when awake.

6th. 9 A. M. Comfortable all day yesterday, but in the night has bitten her tongue

twice; has been three times severely bent back with the cramps, feels weary, ankles ache; raising her up relieves and exhausts her so that she has to be fanned more; pulse full, quick, sharp; appetite less, bowels not moved—urinates. Cocc. $\frac{0000}{24}$.

8 P. M. since 5 P. M. The mucous accumulation in the throat greatly increased; feels worse all over, pain low down and deep in the bowels, and the vexatious lump in the throat, that had almost gone away, has returned again; no evacuation of bowels; pulse 80, and natural.

7th. 10 A. M. The mucous accumulation in the throat and mouth very annoying—about 3 A. M. had a paroxysm of cramps, and bending back, which lasted but a moment or two—pain deep in the abdomen, no movement of bowels.

8th. 10 A. M. Quite comfortable, knees partially bent, increased movement of the jaw, head on line with the body, chin almost on the chest, elevates the fingers of the left hand to the chin, slept sweetly most of the night. About 3 this morning complained of aching in both ankles, her knees and hips, most severe upon the right side, roused from sleep by it, but soon reposed again. Bowels twice moved by enema—has considerable pain in them at intervals—is altogether better; is able to use the muscles of the face sufficiently to smile occasionally, as she cracks her jokes upon the attendants.

9th. 11 A. M. Very irritable, more annoyed with the throat, great weariness, and lameness of the ankles and the right shoulder, general soreness, requires to be fanned often, has been placed upon a bedstead, moves the jaw more freely. The noise in her throat, she says, arises from phlegm, and chokes her, and she has it often in the same way when well; pains of all parts of the body, not of the muscles of the right side of the jaw, the teeth on the left side are loose, and too long; her lower

limbs are quite free in movement, and can move her head to one side a little. Bry. $\frac{0.0.0}{18}$.

10th. Better, moves the limbs some, opens her jaw an inch, eats better, very hungry, no cramps—the stiffness continues across the neck and shoulders.

11th. 10 A. M. Very irritable indeed; awoke last night in bad humor, and continues so since, complains of everything; has passed a restless night, has much soreness, and complains of the wound again; her jaw is much freer. Tinct. Iodine was applied to the wound, and gave at 2 P. M., Staphys. $\frac{0.0}{30}$.

12th. 10 A. M. Has been bolstered up in the bed; opens her jaw quite wide, has eaten toast, swallows well; about 11 last night had a paroxysm of painful tension of the back and shoulders, even her elbows were stiff—especially the right side; it lasted but a short time, and she says she is decidedly better; swallows well, has not slept well for three nights past.

13th. Has been sitting up in an arm chair this morning, and was up twice yesterday—complains of pain and soreness, particularly of the arms and shoulders, when attempting to move, and want of sleep, is lying in bed with a small book in her hands and reading. Bry. $\frac{0.0.0}{30}$, and by mistake some of it was dropped into the tumbler of solution of Sacc. Lact.

14th. Complains of pain and soreness in the back, says she has slept well, shoulders better, has little pains all the time, and once in a while a very severe one. The attendants say she did not sleep sound, but was constantly trembling and twitching. The wounded foot is sore and tender again. The Tinct. Iodine has made the skin crack.

15th. Sitting up, had been frightened last evening, by a child falling off a chair in the room, it was not injured, and it was supposed she had forgotten it. After a restless sleep, in which she rolled from side to side in bed, she awoke very much agitated, declaring the

child was dead, and although the child was produced, and shown to her, she could not be persuaded to believe it, or be pacified; for a while was very delirious, but finally slept towards morning, and the first question after was for the child. She cannot lie upon the back now at all, lies on the left side—right shoulder very sore. Eats meat quite well, bowels twice moved, has bitten the tongue again, feels better this morning.

17th. Sitting up, has spells of anguish, or uneasiness at night, all over her, and slight delirium. Coma vigil. Hyosc. $\frac{0.0}{11}$.

18th. The medicine was taken at 1 P. M., and between four and five complained of great distress and anguish all over her, could not describe her feelings; soon after fell asleep, did not throw herself about as she has done for several nights past; this morning awoke, feeling fine, as she expressed it, and slid herself off the bed herself. Feels well to day, is not so ravenous, and moves the right shoulder and arms better.

20th. Is sitting up, has walked to her chair this morning, cannot quite reach the floor to pick up a pocket handkerchief. Calc. $\frac{0.0}{3}$.

Nov. 1. Is quite stiff in walking. Gave Caust. $\frac{0.0}{30}$, which was the last medicine given, as the patient has recovered her full powers, and has had uninterrupted good health until this time.—Feb. 16th, 1843.

COPPER.

Against poisoning by *Copper*, *Verdigris*, or other *Preparation of Copper*, the best medicines are; 1. *White of egg, or water mixed with albumen*;—2. *Sugar, or eau sucré*;—3. *Milk*;—4. *Mucilaginous substances*.

Filings of Iron, dissolved in *Vinegar*, and mixed with *Gum-water*, have also been recommended as a very efficacious remedy.

CASES OF PRACTICE,

BY

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NEWBURGH.

DYSMENORRŒA.—Miss N. P., aged about nineteen, had for two or three years, or nearly from the commencement of her menstruation, suffered excruciating pains at each recurrence. Her temperament was characterised by dark eyes and hair, fair complexion, *embonpoint*, lively disposition. Her general health good, with the exception of an occasional slight hacking cough and pain in the chest; rather increasing, however, of late. The periods were perfectly regular in recurrence, and in all other respects natural—rather profuse than otherwise—but they were preceded and accompanied with severe pressing pains in the small of the back, hypogastrium and pubes; continued driving, downward pressing and cutting pains in the vagina; great weakness and prostration—frequently odontalgia—head-ache, and fullness in the head.

Treatment.—*SEPIA* 3d, one dose every eighth day. *TINCT. PULSATILLA*, gt. j., in eight spoonfuls of water, one spoonful every two hours, at the recurrence of the periods. There was a manifest alleviation of the distress at the first recurrence of the catamenia after the commencement of the treatment, and that has become more and more apparent at each subsequent return, so that at the present time she suffers scarcely, if at all, more than most other females. The cough and chest-pain appear to have entirely subsided.

STOMACACE.—In many cases of common *canker sore mouth*, much benefit has arisen from the exhibition of *MERCURIUS* 1st or 3d, followed by *ARSENICUM*. In that which is popularly called *nursing sore mouth*, of several

years standing, *NITRI ACIDUM* has completely cured several cases.

INTERMITTENT FEVER. I have had but two opportunities of testing the empirical use of *IPECACUANHA* in this disease, in both of which, however, it was perfectly successful; in neither case were there more than three paroxysms after the first administration of the remedy. The dose was one drop of the tincture, repeated every three hours. One case was a vernal, and the other an autumnal tertian. No further record of either has been preserved.

OTALGIA.—S—, a lad of ten or twelve years, of slender and delicate frame, had been subject to severe pain in one or other ear for two years—each attack coming on at irregular intervals, often by exposure to dampness, but frequently without any apparent or exciting cause, and continuing usually from twenty-four to seventy-two hours, and even longer. The pain was marked by short remissions, more or less complete, and the sensation was described as burning, shooting, and cutting, with a feeling of fullness in the meatus externus. There was no appearance of swelling or inflammation. *Pulsatilla* 1st and *Belladonna* 1st, acted happily as palliatives, and *Calcareia* administered occasionally during the intervals, has prevented any return for some months, and the general appearance of the boy is greatly improved.

INFLUENZA.—The treatment of this epidemic, in its recent appearance in this region, which I found most successful, was *ARSENICUM*, 1st or 3d, once in eight or twelve hours—sometimes preceded by *ACONITE* or *STIBIUM TARTARIZATUM*, according as the febrile or catarrhal symptoms predominated. Many cases exhibited the following progress:—The patient complained of a soreness and burning in the *scrobiculus cordis*, which gradually, and in the course of twenty-four or thirty-six hours, extended to the throat, and, after some

hours more, to the nose and head, with coryza, generally, and some fever. In a few cases the fever was very marked, and began early in the attack. After a continuance of one or two days the symptoms gradually abated, generally in the order of their accession. Other cases exhibited a reverse order of access, beginning with a headache and coryza, and gradually extending to the throat and bronchia. Most patients were left with a troublesome cough, which, if not relieved, continued ten or fourteen days; and all complained much of debility for some days after the attack.

AFFECTION OF THE SHOULDER-JOINT, RESULT OF SCARLET FEVER.

BY P. F. CURIE, M. D.,

LONDON.

W. A., a farmer, aged 25, ill for twenty weeks, applied on the 17th Nov., 1840, for an affection which appeared to be the result of scarlet fever; shortly after that fever he was taken with inflammation of the shoulder, which ended in the formation of an abscess at the right axilla; the joint became affected at the same time with stiffness and darting pains, extending up to the neck, and to the pectoralis major.

At present the shoulder-joint is very tender to the touch and there is inability to move the arm, on account of the stiffness in the joint, which seems fixed. The health has not been much affected but the appetite rather impaired from the commencement of his illness. Disposition mild and patient.

The medicines which effected a cure in this case were Bryonia, Sulphur, and Bellad.

REMARKS.—The case of A. is interesting for many reasons. The origin of the disease was evident: the scarlet fever, treated allopa-

thically, appeared cured, but it was followed by the affection of the shoulder-joint, which, notwithstanding all the means employed, continued getting worse; the symptoms indicated a commencement of anchylosis.

In acute affections, to preserve the patient from death cannot be termed a cure; for, until he be completely restored to his physiological state, no cure can be said to have taken place; in this case A. could not be said to be cured of his fever, as the primary cause of the acute affection had not been entirely overcome.

Bryonia was administered with the view to favor the organic actions going on in the structures of the joint.

Sulphur was given as a general antipsoric, in order to prevent psora from settling upon the part affected, and to cause its expulsion by the mucous and cutaneous secretions. This medicine was given as a general means, and its prescription was indicated by the presence of psora in the system.

Belladonna was opposed to the primary cause which had brought on the scarlet fever.

These three medicines, exhibited at pretty close intervals, removed in a few weeks an affection which it was feared would soon become incurable.

You will observe, that in this case the medicines were selected not only on account of the analogy of symptoms, but also in view of the causes of the disease. It must always be the chief object in the course of a treatment to imitate the efforts of nature; but means must also be opposed to the causes of disease, though they should lie dormant, or apparently so, when the treatment is commenced. The certainty that the patient is laboring under psora, syphilis, or sycosis, is sufficient to justify the use of antipsoric, antisyphilitic, or antisyphotic medicines. The same reasoning holds for the acute miasmata of measles and scarlet fever.

A REVIEW

OF THE LATE REFORMS IN

PATHOLOGY AND THERAPEUTICS.

BY

DR. J. C. PETERS.

[We present our readers in this number with an original essay, from the pen of Dr. Peters, whose industry, as a student of German Medicine, is quite unparalleled in this country. He has, from the first start of our enterprise, been a large contributor to our pages. The "Gleanings" have, thus far, entirely proceeded from him. He also compiled several physiological articles, a very elaborate article on Intermittents, and one of nearly equal merit on Rheumatism, all which will be found in the 1st vol.]

These works, except one or two of the "Gleanings," were executed during the term of his pupillage. He is now a physician; and judging from the past, and from what we know of his unremitting habit of research, in the libraries of his friends, and in the public and private fields of practice now open to him, we risk nothing in saying that he is destined to attain a very high rank in his most happily chosen profession.

The Essay which follows is inserted by us, without perusal, as his own *declaration de foi*: we know it must be worthy of general perusal, though we may not coincide in its opinions, over which we can claim no censorship, nor in any case should we exert it.]

§ 1.

"Let us no longer catch at shadows, but endeavor to seize upon the spirit of science itself; let us now discriminate between the letter and the spirit, or what is the

same, between System and True Art, in order that we may no longer lose the spirit by clinging to the letter, nor True Art, by blindly adhering to System."—HUFELAND.

Pathology and Therapeutics, or the study of Disease, and the study of the cure of Disease, collectively include the whole of the study of Medicine. And, if we glance our eye at the present state of Medicine, we notice that late, although not very recent reforms, have taken place, and are still progressing in each of the two great divisions above mentioned; and mark, also, that neither of them has as yet exerted that influence upon the Medical Profession, as a whole, which they should, and ultimately must.

Inasmuch as a considerable space of time has now elapsed since these two great reforms were first set in motion, we think the time has now arrived for physicians to regard them, neither with the eye of enthusiastic preference nor yet of excessive aversion, but to canvass their merits with the eye of a critic, which should be as eager to detect truth, as it is usually only keen to detect error. Before proceeding further, it is well to premise that it has been said that "every one should endeavor to ascertain the truth on every separate subject of inquiry, instead of following the ordinary process of adopting whole bundles of opinions, as they are commonly found connected together;" and it is added, that "whoever does this, is very sure to agree with one party on some points, and with another on others, and is equally certain to be called fidgetty and crotchety by all parties." But, as this is suffering in a good cause, "every good man and true," should be willing and firm enough to bear up under it. From this digression we turn to make another, because we believe that the shortest and best method of truly estimating the perfections and imperfections of any system of Pathology is to compare its results with the requisitions of a theo-

retically and practically perfect study of Disease. We advance as axioms: 1. That disease only occurs in living organized beings; 2. That all organisation is the result of function; 3. That all organization presupposes the existence of form, structure, and composition; 4. That all function is the result of a power, which in living organized beings, is termed the vital power. Hence we draw the conclusions that disease consists, 1. in an alteration or modification of the vital power; which 2. forthwith produces alterations of function; followed 3. by alterations of form, structure or composition, either singly or collectively. And further conclude that the proper study of disease necessarily presupposes and forces, *a.* the study of the operations of the vital power, and of the healthy functions, which are investigated in a science called Physiology; *b.* the study of the form and structure of living organized bodies, which is learned in a science called Anatomy; and *c.* the study of the healthy composition of these bodies, which is learned in a third science, which has received the name of Physiological Chemistry. Hence we conclude in the second place, that the proper study of disease necessarily requires, *a.* the existence of a science which treats of altered or diseased functions, and which might be termed Morbid Physiology, although it is commonly termed Pathology; *b.* another science which busies itself with the diseased alterations of form and structure, and which should be and is called Pathological Anatomy; and *c.* a third, which investigates diseased alterations of composition, and which should and does bear the name of Pathological Chemistry. Again, alterations of function are made known to us during life by means of symptoms, or so called rational signs; while alterations of form and structure can only be studied during life, by means of the so called physical signs; and alterations from the normal composition can only be accurately learned by means of chemical signs or tests. Hence we draw the final conclusions that any system of Pathology which does not absolutely force the study of all of the six accessory branches of medicine, viz. Anatomy, Physiology, and Physiological Chemistry, and Morbid Anatomy, Pathology and Pathological Chemistry, and does not equally force the study of rational, physical, and chemical signs of disease, must necessarily, if not entirely erroneous, at least be imperfect.

We now turn from all our digressions to a critical examination of the last reform in the study of disease. The publication of *De Sedi-bus et Causis Morborum* of MORGAGNI, in 1760, opened a new era in the study of disease. This work, it is well known, contains a prodigious collection of dissections of the bodies of diseased persons, made by the united exertions of Morgagni and VALSALVA. It is true that others preceded Morgagni in his peculiar labors, and we are, in fact, obliged to make particular mention of BONET, of Geneva, who is said to have been extremely zealous in the study of Morbid Anatomy, and his hearing having become impaired in the latter part of his life, he was led to devote the remnant of his days to the arrangement and publication of the materials he had amassed, and labored with such success that his principal work, the "*Sepulchretum*," published in 1679, was very highly approved, and with some show of reason is even considered to have subsequently formed the foundation of Morgagni's great work. Other minor worthies preceded both Bonet and Morgagni, but still we think that none but the hypercritical will deny the claim of Morgagni to the title of the "Father of Pathological Anatomy," which has been thrust upon him by almost universal acclaim.

The example of Morgagni soon engendered an enthusiastic and one-sided devotion to the study of morbid anatomy, and the *Historia Anatomico Medica*, of LIEUTAUD, and the

Morbid Anatomy of BAILLIE, followed in quick succession upon the publication of *De Sedibus et Causis Morborum*; while in late times the works of Bichat, Carswell, Laennec, Louis, Broussais, Andral, Bright, Rayer, Rokitsansky, Hasse, Gross, &c., &c., all bear evidence of the devotion to Morbid Anatomy which has been perpetuated in the Medical Profession up to the present day.

The necessary consequence of an improved knowledge of the structural ravages of disease, as revealed after death, by the morbid anatomists' scalpel, was to turn the attention of physicians, strongly towards perfecting the means of detecting and marking the progress of these ravages in the sick man during life, and hence the study of symptomatology received a fresh impulse, especially that branch of it termed *diagnosis*, which teaches us the signs by which one disease may be distinguished from another. But it is evident that pathological anatomy throws light but on that class of diseases which are attended with evident objective, physical, or structural alterations; and it is equally certain that neither the subjective or the so called rational signs of disease, nor yet chemical signs, will serve to diagnose organic or structural alterations; hence when we find that is the objective, or so called physical diagnosis of disease, which was principally and almost exclusively developed by the Pathologico-anatomical school, it not only excites in us no surprise, but we recognize at once as a necessary consequence. In fact, so intimately connected with pathological anatomy is the study of physical diagnosis, that we almost expected, before comparing dates, to find that the first great step towards the development of physical diagnosis, was taken by AVENBRUGGER of Vienna, in 1761, just one year after the publication of Morgagni's great work on pathological anatomy. Thenceforward, under the auspices of Corvisart, Laennec, Andral, Louis, Stokes, Piorry,

Skoda, &c., &c., the improvements in the study of physical diagnosis, kept pace with those in pathological anatomy. Still, in like manner, as Bonet was but a pioneer in morbid anatomy, before Morgagni, so were Avenbrugger and Corvisart but pioneers in physical diagnosis, before Laennec, who has been styled the "Father of Physical Diagnosis." He, however, did not carry auscultation and percussion to any high degree of perfection, before the year 1816. The consequence of the example of Laennec, as a matter of course, was to induce a number of physicians to turn their attention almost exclusively to the study of physical signs of diseases, and this was soon carried to such a height, especially in France, that many physicians seemed entirely to have forgotten, that some diseases are characterized only by alterations of function, and others principally by alteration of the chemical composition, and that such diseases necessarily cannot be attended with physical signs, but only by functional, or so called rational, or by chemical signs. The consequence was that the fingers and ears of the physicians soon had more to do in the diagnosis than their brains; perhaps it is better for some physicians to rely upon the former in preference to the latter, and hence we will not allow ourselves to descend into invectives against this one-sided aberration, the more especially as it led to the discovery and great present perfection of auscultation and percussion. It is but justice, however, to state that Laennec never discouraged, but urged every one to excel in the study of rational signs, and that at present the authorities in physical diagnosis, viz. Stokes, Graves, Louis, Andral, Chomel, Bouillaud, Schoenlein, Skoda, &c., also excel in rational diagnosis.

The perfections and imperfections of the pathologico-anatomical school are evident at a glance. In like manner as one may be a brilliant anatomist, and yet be no physiologist; so

may one be a master in pathological anatomy, and yet be no pathologist; but on the other hand, in like manner as one can never become a competent physiologist without being an accurate anatomist, so can one never be an expert pathologist without an extensive and accurate knowledge of pathological anatomy. Again, one may be a master in physical diagnosis, but he will not the less be an ignoramus in those diseases which are not attended with local structural lesions, and which hence cannot be attended by physical signs.

The more the pathologico-anatomical school perfected the knowledge of the ravages of disease, and the more they perfected the physical diagnosis of structural alterations, the greater became the contrast between the advanced state of one part of the study of disease, when compared with the neglected and imperfect state of the study of the cure of disease. They soon found that the old Hippocratic dogma, "*cognito morbo facilis curatio*," only to be true, when we possess an equally exact knowledge of the means of curing disease; they soon felt to its full extent, that no possible amount of knowledge of disease, exclusive of all, or but imperfect knowledge of the means of curing disease, can possibly teach us to cure at all, much less, in a speedy, certain, and safe manner. They had set one great section of the study of medicine rapidly rolling onwards towards its ultimate perfection, and now they anxiously turned their attention to the other and more important section, viz., the study of the cure of disease. But this school and all of its discoveries had risen out of the dissecting room and charnel house, and to these they naturally looked for the means of curing. Hence we are not at all surprised to find Magendi, Orfila and others, poisoning thousands of dogs, cats, rabbits, sheep, &c., with huge doses of powerful drugs and poisons, solely in order to dissect them after death, in order to learn the material, physical, or struc-

tural alterations and disorganizations, thus produced. Now it is well known that the pathologico-anatomical school had almost come to the conclusion that disease is synonymous with inflammation, hence it is quite natural that when they found almost every powerful drug and poison causes inflammation of greater or less degree, that their astonishment should be so great as to make them forget that these very substances had previously cured many and very severe diseases. Having forgotten this, the next step, that of proscribing the use of almost all active drugs and poisons in the cure of disease, was easy, and it is all in keeping to find one portion of them casting reliance, with the tenacity of despair, upon bloodletting, and that *coup sur coup*; and another sinking into the imbecilities of the *method expectante*, and resting their "forlorn hope" upon tsisans and gum water. With all their accurate knowledge of the structural ravages of diseases, and their dazzling use of physical diagnosis, it soon became a proverb in the profession, that one must go to Paris, *i. e.* to the hot bed of this school, in order to learn what disease he is afflicted with, but he must go away again if he wish to be cured. We detect but a single prophetic voice against the therapeutics of this school, and that proceeds from the very man, who, perhaps, was mainly instrumental in plunging it into its grossest errors—it is the voice of MAGENDIE, ascribing a specific and peculiar power to Tartar Emetic and Corrosive Mercury, in causing engorgement, inflammation and hepatization of the lungs, and arguing that, as it is well known that Antimony and Mercury cure inflammation of these organs, we cannot well explain their beneficial effects, unless we admit them to exert a specific action upon the lungs.—(See *Pereira's Mat. Med. Am. edit.* vol. 1. pp. 140 and 561.)

§ 2.

In our first paragraph we briefly traced the history and results of a great reform in the study of disease; we now turn our attention to the peculiarities of an equally great reform in the study of the cure of disease. The means of curing disease are generally said to be contained within the narrow limits of the *materia medica*, and hence any reform in the cure of disease, must be preceded by a reformation in the *materia medica*, which in general is made to embrace two great classes of substances, viz:—

1. *Materia alimentaria*, i. e. food and beverages, or such substances as are positively essential in order to keep up life and health in the healthy person. As we have already seen that there is a science called *physiology*, which treats exclusively of life, and the healthy functions, we take the liberty of terming these, *physiological means*.

2. *Materia medica* proper, i. e. drugs and poisons, or such substances as are injurious to the healthy person, and cause disease. As we have a science called *Pathology*, which treats solely of disease, we may term these, *pathological*, or more properly, *pathogenetic means*.

However paradoxical it may appear, it is no less true on that account, that the physiological or health-preserving means are generally utterly powerless to cure disease, and are even loathed in some affections, especially in acute fevers, inflammations, &c.; while the pathological, or pathogenetic, or disease-producing means, form the main reliance of physicians in the treatment of disease. As these means, i. e. drugs and poisons are injurious to the healthy person, they must necessarily, also, be injurious to the sick, unless properly applied, and it hence becomes a positive duty on the part of physicians to use all possible means of attaining knowledge of the action of drugs

and poisons, prior to attempting to cure diseases with them; and also to be earnest and constant in the search of true laws and principles of guidance in the administration of them. If humanity demands that we should experiment as little as possible upon the sick, we have no resource but to experiment upon the healthy, viz., men and animals. If physicians be too squeamish to experiment on animals, and neither noble nor generous minded enough to experiment upon themselves, but reckless enough to experiment upon the sick, we then can only rely upon accidental or suicidal cases of poisoning, and upon the pangs and sufferings which are wrung from the agonies of the sick, in slovenly and rash attempts at cure, for our knowledge of the action of drugs and poisons. If we are limited to these latter means, such knowledge can only make accidental and occasional, and not regular, systematic and constant advances. As all these methods of attaining knowledge of the action [of drugs and poisons are necessarily attended with suffering, it is well here to compare the advantages of each and all of them, in order that we may learn whether any of them may be dispensed with, or whether, cost what suffering they may, they must be constantly and unflinchingly put in practice:

1. By experimenting on healthy animals, we may push our experiments to the extent of causing severe local lesions, tumultuous constitutional disturbances and death,—after which we may learn the pathologico-anatomical or structural, and the chemical changes produced by drugs and poisons. But animals do not speak a language that we understand, and hence many pains, sensations, and functional derangements must escape cognizance, unless we experiment, 2. on healthy human beings, on whom, of course, we can only experiment within reasonable bounds—we dare not cause severe local lesions, tumultuous constitutional disturbances and death, but at

the most may only bring on functional derangements, evidenced by sensations or symptoms, from which we can only dimly and indistinctly guess at the internal morbid conditions which drugs and poisons are capable of producing, and to which these symptoms point, and from which they proceed. But our knowledge of the action of drugs and poisons on healthy human beings may be very materially aided by a thorough study of the accidental or suicidal cases of poisoning, which have been carefully collected and preserved in the various works on Toxicology. There we may learn the symptoms during life, and note the structural and chemical changes after death, and further compare the former with the results of experiments of healthy men, and the latter with the severe effects of drugs and poisons on animals. It is evident that by employing all these means we must attain to a far more perfect knowledge of the action of drugs and poisons, than by using only a part of them; hence while we receive thankfully all new discoveries gained by the employment of one or the other of these means, we must deny that a one-sided and enthusiastic devotion to one method only, exhausts all our means of acquiring such knowledge, and peremptorily refuse it all claims to actual and ultimate perfection. Again, we cheerfully admit that humanity demands that such experiments should only be continued as long, and pushed as far as is absolutely necessary definitely to settle the peculiar action of each drug and poison. But Magendie, Orfila, and Wibmer have experimented largely on animals; Hahnemann, Joerg and others have experimented freely upon healthy human beings; and Orfila, Christison, Sobernheim, &c., have furnished admirable treatises on Toxicology—now humanity is certainly not so exacting as to demand from us not to study the details of these experiments; Indolence and Prejudice must be more potent in dissuading physicians from

making a close and accurate acquaintance with them.

It is possible that results thus obtained may enable us to deduce laws for the application of drugs and poisons in the cure of disease; but the absolute truth of such laws can only be truly demonstrated at the bed-side, by trials upon the sick—now physicians have been making such for over two thousand years, the details of which are preserved in many huge folios; hence, before we should dare to experiment further, we should compare the results of the actions of drugs and poisons upon healthy men and animals, with the effects which these same substances are known to have produced upon sick men and animals. By such comparison, laws and principles of guidance in the Art of Healing, must flow easily, naturally and certainly. We therefore draw the conclusion that a theoretically and practically correct materia medica should contain accurate and voluminous details and experiments with drugs and poisons on healthy men and animals, and the results of accidental or suicidal cases of poisoning; while an equally correct therapeutics should contain a comparison between the effects of drugs and poisons in health and disease; an elucidation of the principles according to which cures have followed; an establishment of laws and principles according to which future cures or injury of the sick may and must ensue.

We now turn to a critical examination of the late reform in the materia medica and therapeutics, or in the study of the cure of disease. We find that a favorite pupil of the celebrated QUARIN, a pupil whom he so loved and respected that he often entrusted him with the care of part of his extensive and arduous practice, even before he had reached the years of manhood; a man well grounded in the study of medicine, as taught by Hippocrates, Galen, Paracelsus, Van Helmont, Hoffmann, Stahl, Boerhaave, Cullen, Brown, and Darwin,

put forth in 1796, a little "*Essay upon a new method of discovering the curative powers of drugs, with a criticism of the methods previously pursued.*" Starting with the positions that all drugs are injurious to the healthy person, but exert positive and specific curative powers against many diseases; and that it is the special and only vocation of the physician to cure, and relieve the sufferings of the sick, and not to experiment, much less heedlessly to inflict injury upon them, he generously set the example, and earnestly urged the whole medical profession to join with him in making experiments with drugs and poisons upon healthy human persons, in the ardent hope of finding fixed and true laws of guidance for their correct administration to the sick, so that the medical world might at least learn under what circumstances certain drugs must prove beneficial or injurious.

The intentions of HAHNEMANN were philanthropic and honest, and his aim was a truly noble one, but as he experimented upon the healthy human subject only, his *Materia Medica Pura*, could necessarily contain the details of functional derangements and symptoms only, and, in point of fact, does contain an unexampled host of isolated and often very trivial drug-symptoms, fewer connected groups of drug-effects, still fewer distinct and complete descriptions of drug-diseases, and comparatively scanty details of severe local structural disorganizations, and chemical decompositions. As Hahnemann devoted himself through a long series of years with almost unparalleled industry, and with a devotion which could only have been excited by the most elevated and philanthropic desires, he necessarily reaped an unexampled harvest of drug-symptoms, but from what internal morbid functional, structural, or chemical changes they flowed, and to which they pointed, remained either nearly unknown to, or could only be darkly and uncertainly guessed at by him.

It of course became necessary for him to arrange his vast materials, and as isolated drug-symptoms formed the majority of these, the most natural ordination was to arrange them according to the localities or organs which they affected, and hence he classed them under effects upon the head, eyes, nose, &c., arms, legs, toes, &c., according as they influenced these parts. This certainly is a natural arrangement, and we would have no exception to take to it, if it had not been appealed to as the only proof that the Hahnemannian school are in possession of sound knowledge of anatomy and physiology. We readily admit that it is sound knowledge of anatomy and physiology to know that human beings have heads, eyes, noses, arms, legs, &c., but every child knows thus far, and we expect learned anatomists and physiologists to exhibit greater knowledge in their peculiar studies, than every child is in possession of. We look in vain in the *materia medica pura* for an accurate diagnosis of which individual nerve, tissue, organ, system, &c., are seated, each particular pain, ache, swelling, and what not, produced by thousands by every drug, inert or active, with which he experimented. As we know full well the great difficulty with which far greater evils than isolated and trivial drug-symptoms are at times diagnosed, we are perfectly willing to admit, as a partial excuse for the non-performance of this by Hahnemann, the extreme difficulty, and often, perhaps, utter impossibility of such a procedure. But it is very possible to diagnose the exact locality of many permanent and severe pains and lesions, and our knowledge of the effects of drugs and poisons must not be considered perfect until such diagnosis be made; besides the exact application of the Hahnemannian method demands that in order to cure, the drug must act specifically upon the locality of the disease, and if we know not upon what locality the drug acts, how can we cause it to act upon

the seat of any disease. There are very many of the Hahnemannian school who possess the most accurate knowledge of anatomy and physiology, and are also adepts in the diagnosis of natural disease, it remains for them to perfect the diagnosis of drug-diseases. We suggest as another, and perhaps a true reason, why Hahnemann neglected the diagnosis of drug-diseases, the fact, that from the time of Bonet and Morgagni onwards, rational diagnosis was falling into disrepute, because it did not suffice to detect structural alterations, while, as we have seen, the discovery of physical diagnosis did not take place until 1816, and we know that Hahnemann published his first tract in 1796—his *Materia Medica* in 1811, and his *Organon* in 1810.

The arrangement of the isolated drug-symptoms above-mentioned, we admit was the best which could have been instituted with the least trouble; it would certainly have been better to have pointed out not merely upon what organ a drug acted, and the manner of its action, but also the exact part, tissue, &c., of the organ it affected particularly. But science shrieked when Hahnemann laid violent hands upon his groups of drug-effects and upon his drug-diseases, and scattered their component parts like to the twenty-four winds of heaven; by forcing them into the same arrangement which he had adopted for his isolated drug-symptoms, thus destroying every trace of the chronological, causal, or sympathetic relations which the individual parts of groups of drug-effects, and diseases bore to one another. As well might an artist who is in possession of a large collection of fragments of statuary, and a smaller one of entire statues, commence by arranging all the fragmentary heads, arms, legs, &c., together, and then proceed to break off the heads, arms, legs, &c., of his perfect statues, and arrange their fragments in like manner as the first, in order

to have unity of arrangement, and exact systematic order.

But we have thus far been acting on the supposition that the symptoms detailed in the *Materia Medica Pura* are truly the effects of drugs. It, however, has been proven incontrovertibly that Hahnemann and his aids noted down every abnormal sensation, &c., which accrued from the commencement of their experiments to their termination, and hence it is but fair to infer that dozens of accidental catarrhs, rheumatisms, headaches, eruptions, &c., &c., are put down as the effects of drugs. Hahnemann no doubt possessed as ardent an impulse to collect drug-symptoms as a miser has to collect the goods of this earth; but misers rarely collect worthless things,—they close their lean and skinny fingers upon jewels and gold—we would that Hahnemann had collected only important, positively true, and practically useful effects of drugs. It is said of LESSING, the celebrated philosopher and critic, that while a mere lad, he and a school companion, each began to form a collection of minerals, and labored with equal industry,—they separated after a while, and did not meet again for years, when the first question was, “do you still continue your collection of minerals.” Lessing responded by leading his friend to a choice, but small cabinet—the latter in astonishment exclaimed “Why, you had more when a mere school boy, and my collection is more extensive by an hundred fold, in fact, I still have every mineral, worthless or priceless, that I ever was in possession of.” Lessing, the critic, drily remarked, that he had early commenced to throw many of his away. We venture to add, that if Hahnemann had exerted a rigid criticism over his collection of drug-effects, if he had ever and constantly struggled to ascertain the exact value of each of his acquisitions, he would have employed some of his untiring industry and honest zeal in throwing away, and part of the medical

world would never have been deceived into the belief, that Chamomile flowers, Charcoal, and Chalk, produce thousands upon thousands of strange effects.

But this is far, by very far, the darkest side of the *Materia Medica Pura*. With much irrelevant and badly arranged matter, it contains beyond all comparison, a much better and much more extended account of the effects of drugs, than is to be found in all other *materia medicas*, taken collectively, which have ever been published, and it must still be regarded as the right arm of therapeutics. It is true that its details are so voluminous, as to become in some measure confusing, and that it requires an immense amount of patient and laborious study to attain even to a respectable amount of knowledge of its invaluable contents, and even then one is very apt to overlook the peculiar and specific action of drugs, on account of the vast accumulation of secondary, accidental, or occasional effects which are there recorded. Yet, if physicians would be pains-taking enough to use several, or a dozen, or even more common *materia medicas*, as commentaries, or grammars to the great work, i. e. the *Materia Medica Pura*, they would be astounded at the vast flood of knowledge which will thus be elicited by comparison and contrast.

If, to the rich legacy of facts contained in the *Materia Medica Pura*, we add the knowledge of a great therapeutic law, for the correct application of drugs to the cure of disease, the superiority of the Homœopathic *materia medica* and therapeutics above all others, must become forcibly evident to every one.

We forbear to enter minutely here into the difficulties of treating disease, with no other guide than the *Materia Medica Pura*, suffice it to say that we sincerely pity the physician who will know nothing else than Hahnemann and his *materia medica*, and them glorified ;

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and although we honestly think that the Homœopathic method offers, even in its present imperfect condition, the best known means of curing disease, yet experience teaches us that its application is always laborious, frequently uncertain, and often utterly impracticable, and hence we must add, that although much has been done, yet much more remains to be effected. Still when we call to mind what Hahnemann and the Homœopathic school have done to increase our knowledge of the action of drugs ; and what they have done towards rendering the cure of disease more certain, quick and gentle, we become disarmed of all reproach and invective which we think due to the manifold errors and inconsistencies into which this school have plunged, and cheerfully take our stand as one of the upholders of the truths which we conceive to be contained in the doctrines of this as yet reviled and persecuted sect. We have had no wish to detract from the merits of Hahnemann, but on the contrary have a sincere desire to see him elevated from the station of a reviled leader of a comparatively small and despised sect, to the rank which he richly deserves, to that of an universally respected and great reformer in medicine ; that he may be regarded by the world as an highly philanthropic, and generous man, and a truly noble minded and skilful physician ; we cherish the ardent hope that his name, too, may soon be enrolled in that "invisible church of genuine physicians, who, faithful to nature, have been actuated by her spirit, and have always acted according to her intimations, and have preserved her holy word,"—we earnestly wish that the time may not be far distant when his name will be honorably associated with those of Hippocrates, Sydenham, &c. But in order that that time may soon, as it inevitably must come, Homœopathia must not only be lifted from its present low and empirical basis, into a science, but must be purged from numberless crudities,

errors and absurdities, which have crept into and still defile it.

The physiology of Hahnemann commences with the vital powers, and ends in the consideration of a part only of the vital functions, particularly those of sensation; while those functions which tend to structure and composition, are comparatively neglected; hence it dispenses almost entirely with anatomy and physiological chemistry. As his notions of pathology are based upon his physiology; the former consists almost only in a consideration of the aberrations of the vital power, and of sensation, while alterations of structure and composition, or pathological anatomy and chemistry, find no place in it. Hence his theories of health and disease are one-sided vital theories. The consequence is, that dynamic and functional diseases are within the control of Homœopathic remedies, while alterations of the structure and chemistry of the body, are with difficulty and imperfectly cured.

The pathologico-anatomical school commence at the opposite extreme; their physiology is almost sunken into anatomy, while their pathology scarcely outsteps the bounds of pathological anatomy. The vital functions, except those which preside over structure, are almost unheeded; of the vital powers they are so profoundly ignorant, that they think them the result of organizations; hence their notions or theories are one-sided, material, physical, or mechanical ones. One would suppose that this school cured structural alterations with the same readiness that the Homœopathic cure functional diseases. But, alas, the former, unlike the latter, are not in possession of a great therapeutic law; the knowledge of disease is the strong side of the one, the cure of disease is the bright side of the other, and we have no hesitation in adding that the Homœopathic school cure even structural lesions with far greater facility than the pathologico-anatomical, who are without the

knowledge of a great therapeutic law, and whose therapeutic means are mostly confined within the narrow, but sanguinary and peurile limits of bloodletting, cupping, leeching, starving, tisans, and gum water. But if the pathology of the Homœopathic school be extended so as to embrace pathological anatomy and pathological chemistry, and if their knowledge of the action of drugs be enlarged so as to include their pathologico-anatomical, and pathologico-chemical effects, then we have not the least hesitancy in asserting that by means of the Homœopathic therapeutic law, we may be able to cure structural and chemico-vital diseases with the same certainty, if not with the same celerity that we are able to diagnose structural lesions by means of physical diagnosis. And the Homœopathic school may place themselves *instantly* in position to effect this; the works of Andral, Louis, Gross, and Rokitansky on pathological anatomy; those of Liebeig, Simon, Lehman, Berzelius, and Dumas on physiological and pathological chemistry; those of Laennec, Stokes, Raciborski, and Skoda, on physical diagnosis; those of Magendie, Orfila, and Wibmer, on the pathologico-anatomical effects of drugs; and those of Christison, Orfila, Sobernheim, &c., on Toxicology, will enable us to take this giant stride as soon as their contents be mastered.

As we find that our article is regarded as a declaration of faith, we feel ourselves constrained to add a few remarks upon the well known dogma *similia similibus curantur*. It is self-evident that in order to cure any disease, a different state or condition of things must ultimately be induced. It is well known that Hahnemann insists strongly that the action of the curative agent must not be identical, but only similar to that of the disease to be cured; he admits that the greatest similarity, i. e., identity, would certainly add so much more to the already existing disease, and of course ag-

gravate it, while he asserts that a lesser, though still a great similarity of action, between that of the drug and disease, will be followed by a cure, in which the drug action is first substituted for that of the disease, which is, as it were, driven out or dislocated; next the drug action, which is transient, gradually subsides, and a perfect freedom from all complaint is the result. Of course only something different can be substituted, for if it were identical we have seen that it would be added to swell the amount of original suffering. In point of fact all similarity pre-supposes and includes some difference, which is an essential element in every cure, and Homœopathic remedies hence exert an alterative action.

But the question may be put, may we not dispense with the similarity and cure with drugs which only act different or opposite to the action of the disease? We unhesitatingly reply in the affirmative, and assert that any drug which acts specifically upon the locality of the disease, may reasonably be expected to effect a cure, act it similar, different, or opposite, for it is evident that two different actions cannot go on at the same time in the same place; one of the two, viz., the weakest, must cease. Hence, if the dose be well proportioned, and the drug be powerful enough, a time must arrive when the diseased action ceases, and the drug action is about being substituted; at this juncture a cure of the disease is affected, but a drug-disease may supply its place if the physician has not wit enough to withhold the further application of his drugs. It will now be seen that Malfatti spoke truly when he said that the dogmas *similia similibus* and *contraria contrariis curantur* are only relative—the main law which Hahnemann wished to confine to *similia similibus* exclusively, belongs neither to this nor to its opposite, but lies between, in a common centre, in which both dogmas unite and become one. This common centre is difference,

for similarity, difference, and opposition, all agree in being greater or less degrees of difference. We must then unconditionally deny that Homœopathic remedies only are specifics. To render this more clear, we suggest that the Homœopathic method might be extended so as to embrace not only the exciting of a similar state in the very same locality, system, organ, tissue, or function, which is affected by the disease, but also in similar parts and different. The confines of the antipathic method may be enlarged so as to include not only the production of an opposite condition in the very parts diseased, but also in similar and different systems, tissues, organs, and functions. The boundaries of the Allopathic method, of course, admit of the same extension. Then we would say, that the production of similar, different, or opposite states in the very parts, or of the very functions implicated by the disease, must all be regarded as direct and specific methods. The proper application of these methods demands the most accurate knowledge of the every action of remedies, both upon the sick and healthy, upon men and animals. On the other hand the exciting of similar, different, or opposite states, not in the very parts diseased, but in similar, different, or remote parts, must be regarded as indirect or revulsive methods, which may occasionally prove useful. With the aid of all these methods we need not be fearful of curing too many diseases, and, doubtless, a century hence we shall hear no longer of exclusive Homœopaths, Allopaths, or Antipaths, but every physician will strive to apply these various methods skilfully and accurately. For the probable advantages of the Homœopathic and Antipathic methods, we refer our readers to the remarks of Dr. Alexander Walker, quoted in the Examiner, vol. 3, p. 94.

It is well known that Hahnemann has insisted that the Homœopathic is the only true method, and that it is applicable to every va-

riety of disease. In our Gleanings we have labored zealously to prove that the Homœopathic is a true, safe, and certain method of treating very many diseases; but we deny that there is any proof extant that diseases can be cured by no other method. Besides, Homœopathic remedies have not yet been discovered for all varieties of disease, some of which we know, to our cost, are only cured slowly and unsatisfactorily—hence, even admitting, for the sake of argument, that the Homœopathic is the only specific and direct method, no physician is as yet justified in rejecting the indirect and palliative methods.

On the other hand, many diseases have no opposites—what, for instance, is the opposite of a headache, a pustular eruption, a rheumatism, an erysipelas, &c., &c. Hence, if it be absolutely necessary to create an opposite state, in order to cure any given disease, very many diseases must necessarily be absolutely incurable. The Antipathic method never can be an exclusive and universal one.

Again, diseases are often so painful and dangerous that every expedient which the ingenuity of man can devise, for relief or cure, may be brought in play. No physician is justified in sacrificing the life or comfort of those who rely upon him with confidence, under their afflictions, to a theory. In future ages universal and exclusive theories may, perhaps, come to be regarded in the same light as universal panaceas for all the ills that flesh are heir to.

Want of space prevents our going farther—we would merely add, that in like manner as we regard Pathological Anatomy and Physical Diagnosis as the greatest advances which have as yet been made in the study of disease, so do we regard Homœopathy as the greatest advance which has yet been made in the study of the cure of disease. But a century may tell a different tale; much has been done, but much more remains to be done. In like man-

ner as Morgagni, the father of Pathological Anatomy, has been far outstripped by Andral, Louis, Cruvelhier, Rokitansky, &c.; and Laennec, the father of Physical Diagnosis, has been far surpassed by Piorry and Skoda; so will Hahnemann, the father of Specific Medicine, be far outstripped in the study of the cure of disease. The labors of those who came after them only served to reflect credit upon Morgagni and Laennec—so will the labors of those who come after him reflect more and more credit upon Hahnemann.

EFFECTS OF

ARSENICUM ALBUM IN TYPHUS ABDOMINALIS.

BY

DR. BRENFLECK,

Translated from the German,*

BY JOHN SCHUE.

[The following remarks on the effects of Arsenic, were read by Dr. Brenfleck to the "Rhenish Society of Homœopathic Physicians." They embody the contents of an official Report made to the Sanatory Commission of the Grand Duchy of Baden, on the 5th of January, 1842.]

This disease, (typhus,) has been prevalent, sporadically, for the last four months in Horenberg, the number of patients being at one time one, and afterwards two and three at a time, so that, when one recovered another would be taken ill. The present number of patients is five.

* Hygea, Vol. xvii, p. 1, 1842.

The disease, as it manifests itself in Horrenberg, has a precursory stage, in which the following symptoms are observed:—A sensation of confusion and dulness in the head, and slight vertigo; appetite disturbed; taste bitter; limbs feel as if they were beaten and fatigued; constipation, and slight griping pains in the abdomen.

In the *second stage*, the gastro-inflammatory, or that of irritation, the above mentioned symptoms increase in intensity, and the chills preceding the fever are at times very slight, at others severe. The patient is obliged to keep his bed. The first complaints are: an excessively bitter taste in the mouth; nausea; pressure in the scrobiculus cordis; pain in the hepatic region, or which happens more frequently, in the region of the Cæcum.

All these symptoms were present in every case of this disease in Horrenberg, and I therefore deem them as pathognomonic of Typhus Abdominalis, although others, as Becker, (Pruss. Med. Zeit., 1834, 31,) consider the shrivelled and red tongue (colour of smoked salmon), accompanied by diarrhœa, as the only pathognomonic symptoms. I do not deny that in a majority of cases the last two symptoms were present, but I also had cases in which the tongue was moist, covered with a dirty white fur, and where the bowels were constipated during the whole course of the disease.

Other symptoms, which in different individuals appeared of different intensity, and in some cases were entirely absent, were, a pressing headache, as if the skull would burst; vertigo, when rising; humming in the ears, want of appetite; insatiable thirst; violent or quiet deliria; skin dry, and when touched, feeling like paper; debility and sinking.

Third stage, or that of the formation of ulcers. Torpor; eyes glassy; facies hippocratica; cold perspiration on forehead; fuligo labiorum, dentium et linguae; tongue dry,

which it is impossible for the patient to put forth; gurgling noise of the liquid taken; tympanitis; twitching of the patient, when touched in the ileo-cæcal region; involuntary discharges of fæces and urine of an extremely offensive smell; respiration snoring and short; speech mumbling and unintelligible, or entirely absent; pulse small and trembling; excessive debility; automatic motions of the hands; nocturnal deliria, with picking in the air.

The treatment followed by me was the Homœopathic.

In the precursory stage the country population rarely seek assistance. In the second stage, Aconite, Belladonna, Bryonia soon lessened the excitement of the vascular system, and afforded the patient rest. Bryonia corresponded to the gastric symptoms, and the inflammatory or sub-inflammatory state of the liver, the pain in the hepatic region was soon lessened, and comfortable sweats soon followed.

In the stage of ulceration I administered Carbo. Veg. and Animalis, Spiritus Phosphoratus, and Arsen. Alb., prepared according to the rules of Hahnemann. I have lately convinced myself that Arsenicum is fully indicated in the third stage, and has the most astounding effects. I administered a dose every three hours.

The patients who have been, and still are treated by me, are the following.

[Here follow the names of the patients, with their ages, which it will be unnecessary for us to give here. The whole number of individuals treated was 29, 15 of whom are females; the oldest 68, and the youngest 8 years of age. One of this number was treated by the Doctor after she had been for some time under Allopathic treatment; another left him and was treated by an Allopath, under whose treatment she died, and another sent for him after she had been Allopathically treated for sixteen days.

All the patients treated by the Doctor re-

covered, except one seamstress, 38 years of age, who for many years previously had been in a delicate state of health.]

After I had become aware [the Doctor continues] of the extraordinary effects of Arsen. in Typhus Abdominalis, I became bolder in the application of it; I resolved to give it in the second stage, and to confine myself to its sole use. An opportunity of doing so soon offered, in four cases which occurred successively. They recovered, with one exception, viz., a woman, 66 years old, who died. It is such results which induce me to recommend to the profession the use of Arsenicum in this fatal disease. It has done me most invaluable service, in cases even which experienced physicians declared hopeless. The preparation I made use of was the second dilution. In a few cases it seemed at first to increase the number of fluid stools; this, however, did not deter me from giving, the next day, a weaker dose, after which the pains in the abdomen and the fluid stools would disappear, and moderate perspiration would set in. In some cases even a single dose would suffice to stop the thin discharges completely.

The same happy results, from the same medicine, I experienced in the treatment of some infantile diseases; as gastritis mucosa infantum, and cholera infantum. At first I let Veratrum and Secale precede it in the treatment of these diseases, but subsequently I confined myself exclusively to the use of Arsenicum, giving it either in Sacchar. Lact. or Aq. distill.

I cannot conclude, without stating in explanation, that a majority of the 11 fatal cases were such as either death had already taken hold of, or in which treatment was too late called for, or where it was interrupted, either because the relatives feared the expense, or had given up all hope of a successful issue.

ANSWER TO AN ENQUIRY

IN

No. 21, Vol. XXIII, HOMŒOP. ZEIT.*

I have had an opportunity to treat several cases of inflammation and suppuration of the antrum bigmor, as well as of the frontal sinuses. A large number of drugs, even those recommended in No. 21, with exception of Staphysagria, proved perfectly ineffectual. I can, however, recommend Arsenicum and Lycopodium as truly specific in this disease. The former very promptly relieved in two or three days, the excruciating pains, usually of the quotidian type, and at the height of the paroxysm of a throbbing nature, and in some instances it alone was sufficient to remove the whole disease. In a few cases, however, the secretion remained thick and of a lemon color, which would always yield to Lycopodium. The urine in these cases is always saturated, and after Lycopodium always has a red gravelly deposit.

In the case in question I would for the first few days give Arsenicum, if after that time the yellow secretion should remain, I would give Lycopodium. For the carious opening, if any such should remain, I would administer Silicia.

DR. GOULLON.

Weimar, March 10, 1843.

CHOREA.—M. Person, of St. Petersburg, has lately employed *chloride of tin* for this affection, with a very salutary effect.

* Hom. Allg. Zeit., Vol. xxiv. No. 2.

ANNUAL REPORT OF CASES TREATED IN THE HOMŒOPATHIC HOSPITAL OF GUNS,
(HUNGARY) BY M. BLESS, M. D., PHYSICIAN TO THE HOSPITAL.

Form of Disease.	Patients remain- ing at the close of 1840.	Entered during 1841.	Cured.	Left the Hos- pital improved.	Entered mori- bund.	Died.	Remained.
Abscess	—	1	1	—	—	—	—
Aneurism	—	1	—	1	—	—	—
Angina	—	1	1	—	—	—	—
Abdominal dropsy	—	1	—	—	—	—	1
Necrosis of frozen toes	—	1	1	—	—	—	—
Chlorosis	—	2	2	—	—	—	—
Hæmoptysis	—	1	1	—	—	—	—
Congestions	—	1	—	—	—	—	1
Rheumatic pains in the chest	—	1	1	—	—	—	—
Glandular diseases	—	1	—	1	—	—	—
Chronic Diarrhœa	—	1	—	1	—	—	—
Inflammation of the Eyes	—	1	1	—	—	—	—
“ “ Lungs	1	6	7	—	—	—	—
“ “ Pleura	—	3	3	—	—	—	—
Fever apoplectic	—	1	—	—	1	—	—
“ bilious	—	4	4	—	—	—	—
“ gastric	1	7	8	—	—	—	—
“ “ with gout	—	1	1	—	—	—	—
“ nervous	—	4	3	—	—	—	1
“ petechialis	—	10	8	—	—	2	—
“ intermittent quot.	—	1	1	—	—	—	—
“ “ tert.	—	4	4	—	—	—	—
“ “ quart.	—	1	1	—	—	—	—
“ hectic	—	1	—	—	—	—	—
Lichen humid	1	—	1	—	—	—	—
Chronic ulcers of the feet	1	3	1	—	—	—	3
Gout	—	4	3	—	—	—	1
Grippe	—	1	1	—	—	—	—
Ischuria	—	1	—	1	—	—	—
Hysteria	—	1	1	—	—	—	—
Hypochondria	—	1	1	—	—	—	—
Scabies	2	15	16	—	—	—	1
“ accompanied by Gonorrh.	—	1	1	—	—	—	—
“ “ Contusion	—	2	2	—	—	—	—
Induration of the Liver	—	1	1	—	—	—	—
Phthisis Pulmonalis	—	1	—	—	—	1	—
Dyspepsia	—	5	5	—	—	—	—
Morbilli	—	7	5	—	—	—	2
Morbus Macuosus	—	1	1	—	—	—	—
Panaritium	—	2	2	—	—	—	—
Contusio	—	3	3	—	—	—	—
Inflammatory Rheumatism	1	4	5	—	—	—	—
Erysipelas of the feet	—	2	2	—	—	—	—
Dysentaria	—	2	2	—	—	—	—
Chancre	1	6	6	—	—	—	1
Syphilis secondary	1	—	1	—	—	—	—
Sprains	1	1	2	—	—	—	—
Insanity	—	1	1	—	—	—	—
Laceration of the palm of the hand	1	—	1	—	—	—	—
Sum Total.	11	121	113	4	1	3	11

Mortality $2\frac{1}{2}$ per centum.

Since the existence of the Hospital there have been

Received . . .	738
Cured . . .	666
Dismissed not cured	5
Improved . . .	10
Brought in dying .	17
Died . . .	29
Remained under treatment	11

Mortality $4\frac{0}{71}$ per centum.

M. BLESS, M. D.

Guns, January 20, 1842.

POSTSCRIPT BY DR. ATTOMRY.

The Hospital Society of Guns have resolved, as a proof of their satisfaction with the labors of Dr. Bless, to have his portrait taken for one of the apartments of the institution.

From the Hospital of Gyongyos I am also enabled to report favorably. The Hospital Society have had a session at the close of 1841, and resolved to add to the two large wards at present existing, another ward for surgery, two for insane patients, and one for Obstetrics. A number of members have made handsome donations to the fund of the Society. Thus Prince Esterhazy, the present ambassador at the court of St. James, has sent 200 florins.

Dr. A. Horner himself, the physician of the Hospital, has been honored by a mark of distinction by his fellow-citizens, by being elected City Physician, although his Allopathic colleagues had offered to *officiate gratuitously* for life.

MODE OF FORMATION OF THE ERGOT OF RYE.

The formation of this substance, a subject both interesting and important to the medical practitioner, is thus explained by M. Debourge. The grains in which it appears first soften, become very friable, and undergo a species of fermentation, exhaling at the same time a very disagreeable smell. Their outer surface

is now seen to be intersected with many small furrows, moistened by a whitish, viscous, and saccharine liquor, which reddens turnsol-paper. This liquor exudes in greatest quantity from the summit of the grain, where it agglutinates together all parts of the inflorescence. At this period, the perisperm becomes everywhere destroyed, except toward the summit, where it is the cause of the greater consistence of the ergot. The outer surface, previously white, now becomes brown, and afterwards black, first in the inferior portion, and then throughout the rest of the grain. The furrows disappear, the grain elongates, and it soon emerges from its outer covering (the glume) in all its distinctive characters. Thus, the formation of the ergot presents two distinct epochs; the first comprising the destruction of the perisperm, the softening, and the saccharine fermentation of the grain; and the second, the period of its assuming its deep color and morbid enlargement.

It was formerly supposed that the ergot was the result, jointly, of a mal-development of the germ, and the presence of a parasitic fungus, which, though still hypothetical, has been denominated by some French authors *sphacelia segetum*. But what was considered by these to be the fungus at the superior extremity of the grain, is now shown by M. Debourge to be only the undestroyed portion of the perisperm, with some part of the hairy epithelium, the decayed stigmata, and sometimes anthers entire, agglutinated together by the viscous discharge. M. Debourge naturally asks how it is that a parasitic body should become marked with a similar longitudinal wrinkle, and covered with the same hairy epithelium, as the grain? The ergot invariably begins to form some time after the inflorescence of the rye and other *gramineæ*, and for the most part, says M. Debourge, on the grains which are most tardy in their development.—*Gaz. Medicale*.

T H E

HOMŒOPATHIC EXAMINER.

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VOL. 3.

EUPATORIUM PERFOLIATUM.

BY

W. WILLIAMSON, M. D.,

PHILADELPHIA.

Philadelphia, July 25th, 1843.

MY DEAR SIR,

Having heard, during my Allopathic career, so many desultory remarks about the Eupatorium Perfoliatum, ascribing great medicinal virtues to it, especially in some kinds of fever, yet without any settled indications for its use, I was induced to make some experiments with it, and endeavor to find out its application to disease according to the law *similia similibus*. Nearly half a century ago there prevailed throughout the United States a peculiar epidemic, which, from the constancy of the attending symptom of pain in the bones, was denominated *break-bone fever*. The Eupatorium Perfoliatum (a diaphoretic ! !) so signally relieved the disease, notwithstanding *copious perspiration* was a frequent attendant, that it was familiarly called *bone set* ; a common name, by which it is still extensively known. I was still further encouraged to make experiments from its well known emetic, cathartic, and diaphoretic properties, all evincing the active qualities of the plant, and the facility of collecting some of its pathogenetic symptoms.

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You will perceive, however, by the small number of the symptoms, that the trials which I have made with it on the healthy have not been numerous ; but, few as they are, they may be of considerable service as indications for the use of the remedy, and also form a kind of nucleus around which others may be gathered by future experience. You may also perceive that the investigations have been conducted chiefly in reference to its effects in intermittent fever. I pretend not to say that *all* its characteristic symptoms are clearly pointed out, even in that disease ; but I am quite sure those printed in italics may be relied upon, as they have been repeatedly verified in practice.

It is remarkable that the Eupatorium Per. when given in a large dose, produces very copious diaphoresis, and yet one of the indications for its use in intermittent fever appears to be *inconsiderable perspiration*.

The investigation of a new remedy is a matter in which the whole profession has an interest ; therefore have I obtruded on your notice this crude essay, containing my experience with the Eup. Per., in order that the attention of others may be attracted to it, and further trials elicited, especially from those living in miasmatic districts of country. And I am well persuaded from the unequivocal effects which I have witnessed, they will discover in it the most invaluable properties. It is hoped that all who make experiments with this remedy will communicate the results to the profession, so that each member may have

the benefit of the experience of the rest. If every practitioner of Homœopathy could be made to feel himself under obligation thus to communicate the result of his trials with a new medicine, we should soon have the means, from the accumulated experience of numerous physicians, of ascertaining the real merits of a remedy, and speedily render it available in the treatment of disease.

I know several physicians who have a large number of symptoms of plants and other medicinal substances, which they are probably withholding until the number and arrangement of them shall have been completed; but it would greatly enhance the value of our materia medica to publish them, even if they do not possess the most perfect symmetry. Other physicians may have been investigating the same articles, and thus the symptoms and observations of persons having no intercourse on the subject of experiment would become known, which, if they harmonize, would corroborate each other, and entitle them to the greater confidence; so that, if the labor of one investigator should seem to be anticipated or superseded by that of another, the researches of each would still be valuable, as the true symptoms would be thereby established, and the erroneous ones rendered very doubtful.

We unquestionably have a great many indigenous plants, which possess very active properties, and of the most valuable kind, too, that have not yet been subjected to Homœopathic experiment, and whose sanative powers are much needed in the treatment of the diseases of our variable climate. If there be any truth in the remark that every country and climate produces the medicinal substances best adapted to the treatment of its own diseases, we might expect the matter to be verified in relation to the medicines and diseases of this country; for our vast extended borders embrace almost every variety of soil and of cli-

mate, alike favoring the perfection of vegetable substances and the production of endemic diseases. And hence we have another powerful argument in favor of prosecuting the study of our native remedies.

I have some symptoms of a few more indigenous plants, which might be presented if they would be acceptable in such an unfinished state as that in which the symptoms of the Eup. Per. are submitted.

To the symptoms I have subjoined a few cases of intermittent fever, which were successfully treated with the remedy.

Very respectfully,

W. WILLIAMSON.

A. G. HULL, M. D.

SYMPTOMS OF EUPATORIUM PERFOLIATUM,
BY W. WILLIAMSON, M. D.

The cases in which this medicine promises the greatest usefulness appear to be: headache, arising from disordered stomach; fevers attended by *gastric derangement*; *intermittent fever*; *bilious fever*; rheumatic affections, attended by perspiration; soreness of the bones; *Cachectic condition of body* from frequent or long continued attacks of intermittent and bilious affections; loss of appetite; dyspepsia; indigestion of old people; general debility; (influenza?); (bronchitis?).

Headache, with a sensation of soreness internally; better in the house: aggravated when first going into the open air, and relieved by conversation.—Throbbing headache—pain extending from the forehead to the occiput, greatest on the left side.

Belching of tasteless wind, with a feeling of obstruction in the epigastrium. The sensation of something in the stomach that ought to come up, without the ability to raise it—general shuddering, proceeding from the stomach—*vomiting of bile, with trembling, attend-*

ed by *pain in epigastrium*, with *nausea* and *prostration* in the extreme, even to faintness. Each spell of vomiting is preceded by thirst. Vomiting immediately after drinking—purging stools, with smarting and heat in the anus—tenesmus, with a small discharge of loose stool—morning diarrhœa—four or five watery stools in a day—hacking cough in the evening—cough, with soreness and heat in the bronchia—cough aggravated in the evening—grating sensation in the chest at every deep inspiration.

Intermittent fever, quotidian or tertian—the *paroxysm generally commences in the morning*—*thirst several hours before the chill*, and continues during the chill and heat—the thirst frequently commences in the night, previous to the chill, in tertian ague—*stiffness of the fingers during the chill*—*soreness in the bones*—aching pain, with moaning, throughout the cold stage—a *greater amount of shivering during the chill than is warranted by the degree of coldness*—*retching and vomiting of bile from drinking*—*vomiting after every draught*—*vomiting at the conclusion of the chill*—distressing pain in the scrobiculus cordis throughout the chill and heat—chill beginning at 9 o'clock in the morning—*throbbing headache during the chill and heat*—violent pain in the head and back before the chill—*inconsiderable perspiration or none at all*—fever in the forenoon, preceded by thirst early in the morning, but no chill; attended by fatiguing cough, and not followed by perspiration—loose cough in the intermission—cough in the night previous to the paroxysm—*yellowness of the skin*.

Confirmatory of the foregoing symptoms, the following cases of intermittent fever, successfully treated with the Eup. Per., have been selected.

Case 1. I was called to Mrs. S—, who lived in a miasmatic district, on the 19th of November, 1841, on account of intermittent

fever, with which she had been attacked a few days before. Without troubling the reader with all the details of the treatment, from the beginning of the disease, I would briefly state that from the above date until the 12th of December following, I administered in succession Arsen., Ipecac., Acon., Cinch., Sulph. of Quinine 12 grains, Verat., Antim., Sul., Cina, and Sabad., without making any decided impression on the disease.

The chill began at nine o'clock in the morning, and lasted about four hours, when the heat commenced, and continued about seven hours, and was seldom followed by perspiration. The next day there was a lighter paroxysm, which commenced at 12 o'clock, and ceased about the same time in the evening as the heavier one on the day preceding. The paroxysms continued to occur thus alternately through the space of twenty-three days above mentioned.

Dec. 12th, the following symptoms were presented: Chill commenced at 9 o'clock in the morning, and lasted four hours, attended by a great deal of shivering and trembling—raging thirst before the chill, and during the chill and heat—vomiting of whatever was taken into the stomach and of bile, with distressing pain in the epigastrium—distracting headache during the heat—fever ceased about 8 o'clock in the evening, and was followed by inconsiderable perspiration. Eup. Per. 1, in water, a teaspoonful every hour in the apyrexia, cured the case, without the recurrence of another paroxysm.

Case 2. Mrs. B. R. M—, living near the Schuylkill river, of bilious diathesis. A case of tertian ague. Chill at 9 o'clock in the morning, which lasted an hour and a half—thirst in the night before the chill—raging thirst during the chill and heat—violent headache throughout the paroxysm—some perspiration—retching and vomiting during the chill immediately after drinking—vomiting of bile.

Eup. Per. 1, five drops in as many teaspoonfuls of water, of which she took a teaspoonful ever two hours on the alternate day. Early on the morning of the expected chill, Eup. Per. ti. gtt. iv. in 8 teaspoonfuls of water, a teaspoonful every hour. The paroxysm did not return. This patient had been subject to frequent attacks of intermittent fever for several years and had always suppressed them with Sulph. of Quinine, but since the above attack, now a period of 16 months, she has had no return of the disease.

Case 3. M. P——, a girl of 14 years of age, living in the neighborhood of Fairmount.—Tertian intermittent fever—thirst before the chill—became stretchy and looked pale at 9 o'clock in the morning: felt cold and chilly but did not shake, walked about the house crouched up, was very thirsty during the chill and heat but took only a little sup of water at a time—headache and trembling during the heat—the coldness lasted an hour and the heat about two hours: followed by very little perspiration. Eup. Per. ti. a few drops in water: dose, a teaspoonful every 3 hours.

Case 4. A. P——, sister to the last patient and living in the same house. At 8 o'clock in the morning she was attacked with pain above the right ilium, thirst and a disposition to yawn—fingers became stiff, with slight coldness—upon taking a drink of water shuddering commenced immediately—chill lasted two hours and a half—headache, backache, and thirst during the chill—nausea as the chill was going off—the headache was increased, but the thirst was diminished during the heat—sensation of great weakness during the fever, so much so, that she could not raise her head from the pillow—trembling in the back, with faintness from motion, during the fever. The fever terminated by moderate perspiration during sleep in the evening. She felt pain in her bones early in the morning, before the attack. Eup. Per. tinct., in water,

a teaspoonful every three hours. Had but the one paroxysm.

Case 5. T. R——, had tertian ague for two weeks before I saw him. Sickly, sallow countenance—chill at 8 o'clock in the morning—thirst throughout the night previous to the chill—thirst during chill and heat, and vomiting immediately after each draught of water—vomiting of bile at the close of the hot stage, which was followed by inconsiderable perspiration. Eup. Per. tinct., in water, a teaspoonful every three hours.

LETTER FROM DR. NEIDHARD TO DR. WILLIAMSON, ON THE SUBJECT OF
EUPATORIUM PERFOLIATUM.

Philadelphia, July 26, 1843.

MY DEAR SIR,

Your statement with regard to the decided efficacy of the Eupatorium Perfoliatum in certain cases of intermittent fever, I have found fully corroborated in two cases, where the following symptoms were present:—Violent thirst before the chill, and slight during it; nausea and sickness of the stomach (in one case vomiting) at the commencement of the heat, with violent throbbing headache; tastelessness of food; want of appetite; tongue coated yellow; the chills set in in the morning, and lasted for one or two hours; heat during the rest of the day, and slight perspiration in the evening; type tertian. In one case the Sulph. of Quinine had been administered, without preventing the recurrence of the paroxysms.

I gave in the apyrexia gtt. 3 of the tinct. Eupat. Perfol., in water, every hour, which produced no aggravation, a slight headache excepted, and prevented the return of the next attack permanently.

Very truly yours,

C. NEIDHARD.

W. WILLIAMSON, M. D.

CLINICAL LECTURE ON HOMŒOPATHY.

BY P. F. CURIE, M. D.,
LONDON.

LARYNGITIS.

The denomination "Laryngitis" has been given to inflammation of the mucous membrane of the larynx, and of the cellular sub-mucous tissue of that organ. Hence are there two anatomical species, mucous laryngitis and sub-mucous laryngitis, each individually corresponding to different symptoms.

Mucous Laryngitis is divided into the *acute* and the *chronic*, of both of which the last stage is ulcerous laryngitis, or laryngeal phthisis.

Sub-mucous laryngitis is equally divided into *acute* and *chronic*; this latter is included in ulcerous laryngitis.

Acute mucous laryngitis. We will subdivide it into catarrhal, and croupal, or pseudo-membranous.

1st.—Catarrhal laryngitis, or laryngeal catarrh.

This disease is chiefly observed at those seasons, and in those places, the temperature of which changes suddenly, as spring and autumn. Cold is the most ordinary and the most powerful excitant cause of laryngitis; it more especially succeeds in giving rise to it, if it happens to act upon a person who is then in a state of perspiration. Irritating vapours, efforts of the voice, the act of speaking in the open air, a directly contrary wind, particularly while running, are all equally causes of laryngitis. The same may also be said of a peculiar state of atmosphere, yet unknown in its essence, and which stamps a character, *sui generis*, on all the diseases of the season.

ACUTE LARYNGITIS.

Symptoms.

The common character of all degrees of Laryngitis is, alteration in the voice, which becomes hoarse, muffled, and grave, when the inflammation has but slightly diminished the dimensions of the glottis; and acute, or even extinct, when the contraction is greater. To this symptom, which is pathognomonic, are added the following phenomena: feeling of uneasiness, of obstruction and pain in the larynx; pain excited or augmented by the application of a lateral pressure against the thyroid cartilage, laryngeal cough, troublesome, painful and sometimes convulsive, and attended with an increased pitch of the voice: the cough, at first dry and without any secretion, is soon attended with transparent mucous expectoration, then opaque muco-purulent. Breathing is more or less uneasy, especially during inspiration, which is performed with a sort of whistling sound. Deglutition is more or less painful, independently of all inflammation of the pharynx. If the inflammation is in the least violent, fits of suffocation occur, which appear to be the result of spasms of the larynx. During these fits, the respiration, voice, and cough, assume the peculiarities of croup. These sympathetic phenomena are generally but slight; nevertheless, a greater or less loss of appetite may be noticed, general uneasiness, at times heat of the skin, slight frequency of the pulse, shrinking in of the face, all of which increase or diminish according to the violence of the disease.

Progress of the Disorder.

It begins sometimes by so violent a fit of suffocation, that the life of the patient appears threatened with danger; in other cases, it is attended by a mere hoarseness of the voice, or by aphonia; these symptoms gradually acquire more intensity, and are followed by the ex-

pectoration of a large quantity of mucus. The disease may pass into a chronic state, or change to a sub-mucous, or croupal laryngitis; or, again, it may possibly end in death.

Pathological Anatomy.

In the autopsy of children, a greater or less quantity of muco-purulent effusion is to be met with in the larynx and trachea, and the mucous membrane exhibits a red tinge, more or less vivid, which, however, disappears when the disease has lasted some time. In adults, who have fallen victims to other diseases attended with a complication of laryngitis, the mucous membrane has been found red and thickened; the upper edge of the epiglottis frayed as if it had been subjected to the irregular incisions of a sharp instrument, and the inflammation of the mucous membrane reaching to the sub-mucous cellular tissue. The lower extremity of the arytenoid cartilage has sometimes shown in the interior a slight loss of substance; at other times a purulent collection is found in the folds of the mucous membrane (the epiglottic-arytenoid fold); sometimes the cartilages of the larynx are steeped in pus, and the follicles are inflamed so as to cause the appearance of a quantity of superficial ulceration on the internal surface of that organ.

Mechanism.

The mechanism of laryngitis is similar to that of pneumonia; the most frequent cause being cold, which suddenly impedes the cutaneous perspiration, whether it appears in the state of positive sweat, or in that of imperceptible transpiration. This secretion, when suppressed, is carried off into the torrent of circulation, and must be cast out by some organ supplementary to the skin. The circulation acquires greater or less rapidity, according to the gravity of the case, in order to convey quickly out of the organic system, the morbi-

fic cause. The larynx, which has been chosen as the organ of rejection, becomes painful, heated, and the organic movements quicken in its secreting membrane, a greater or lesser degree of expectoration is the result of its chemical action. Contractions of this organ, and of the adjacent muscles expel from the system this new product, the result of Nature's effort at restoring that equilibrium which has been destroyed by the suppression of the cutaneous perspiration. An examination of the body corroborates this explanation, as it shows the mucous membrane to be swollen and red, a sign that the circulation had acquired considerable increase in that organ during the course of the disease.

The mechanical action is the same where the disease is owing to the irritation caused by gases or dust. Still there is a foreign matter that requires to be expelled, to prevent the absorption of which there is increase in the circulation, tending to the formation of a mucus, with the design of protecting the mucous membrane, and of removing any strange particles; there is also augmentation in the contractility of the fibres of the organ, causing cough, in order to expel the morbid cause; moreover, the circulation brought into increased action at the affected point (whatever may be the cause that excites the organic action), to provide the molecules required for the re-composition of that organ, which re-composition becomes indispensable from the greater activity of its tissues.

The mechanism and alterations of the organ lead to an easy comprehension of all the symptoms: First, the flow of blood causes heat, uneasiness; the greater flow of nervous fluid causes pain; the increased contractility explains the cough; the difficulty in breathing depends on the narrowness of the passage for the air, caused either by swelling of the mucous membrane, or by contraction of the muscles of the larynx.

Prognosis.

The nature of the disease being thoroughly appreciated, from a knowledge of the cause, and of the mechanical action which it calls forth in the organic system, the prognosis must always be favorable when that method of treatment is adopted which strengthens the curative efforts of our organic system:—thus treated, Laryngitis can never be attended by fatal consequences, nor should we look for serious effects, expecting in some persons completely deteriorated in health, and suffering from far-advanced chronic disorders: when the system is thus worn out, it sometimes occurs, that an acute disease may strike the last blow; but again we would repeat, it is such cases alone, of the most extreme nature, that can resist the powerful efficacy of homœopathic treatment.

Treatment.

Aconitum, at the sixth or twelfth dilution, from one to three globules, is found to be very useful in acute laryngitis. It will be necessary to begin almost always by this medicine in those cases where the disorder is of sufficient violence to produce a febrile action; it is equally advantageous when the patient is affected with more or less pain in the larynx, a constant irritation obliging him to cough, and when the cough is short and dry.

Arsenicum should be prescribed principally in the epidemic cases of influenza, when there is a complication of laryngitis and fluent coryza; sneezing, the voice harsh, hoarse, trembling, unequal, sometimes loud, sometimes weak, feeling of dryness, and of burning heat in the larynx, and when there are tenacious mucosities in the larynx. A state of great dejection in physical strength, painful want of sleep, are again signs which indicate the use of arsenicum. This medicament must be prescribed in doses of one or two globules from the sixth to the fifteenth dilution, and

may be made either to precede or follow the administration of aconitum.

Chamomilla is above all useful with children, when the disease occurs in winter, and the subjects are of extreme nervous sensibility. In cases of cough, with accumulation of mucosity in the throat—burning pain in the larynx, spasmodic pain in the trachea; also when dry cough is caused by continual tickling of the larynx and trachea, it should be given from one to two globules of the ninth to the twelfth dilution.

Hepar Sulphuris.—As soon as the general and local movement of circulation, being strengthened by *Aconitum*, begins to resume its course calmly, the practitioner has chiefly to assist the local power of expulsion, it is then that *Hepar Sulphuris* is found to be useful: it is indicated when the organic action shows itself by more or less pain in the larynx; when the voice is weak and hoarse; when the pain can be increased by pressure, or by speaking; when the cough is dry, hollow, rough, and with mucous expectorations of greater or less tenacity, if the patient perspires easily whether he is moving about or in bed; also, if he is affected with grief, inclination to cry, &c. This medicine is principally indicated when, in addition to all these circumstances, the patient is afflicted with *Psora*.

Hepar Sulphuris is to be prescribed in doses of one to three globules from the third to the sixth dilution, which may be repeated twice or three times during the day, if a continuance in its use is still indicated.

Spongia is equally useful after *Aconitum*, whether it be administered after the *Hepar Sulphuris* or before it; when the patient is hoarse; when there appear coryza and cough; when the voice is not clear, and suddenly fails in conversation, with pain in the larynx on being touched, or on turning the head; an unyielding sensation in the larynx, with uneasiness in breathing, burning pain in the larynx

and trachea ; hollow, dry cough excited by a burning tickling in the larynx ; inconsolable humor accompanied by tears, timid disposition : all these point out the use of Spongia, which is to be prescribed at a low dilution, the third or sixth, and at the same dose as Hepar Sulphuris.

Lachesis, to be given in doses of one to two globules of the sixth or fifteenth dilution, after the use of Aconitum, of Arsenicum, or of Hepar Sulphuris ; the indications corresponding to this remedy occur when the patient suffers from a continual hoarseness, with the sensation of foreign matter in the throat, which cannot be removed, and which impedes the speech ; when there is a pain as of constriction in the larynx, with the feeling of swelling ; hollowness in the voice, with nasal sound ; when the patient is tormented by a fatiguing cough, without the possibility of raising any expectoration ; or cough excited by a tickling in the larynx.

The remedies, which we have recommended above, will be given in succession, according to the indications ; generally one dose of either of them every twelve hours will be sufficient : in very acute cases the medicine must be repeated oftener, every third or fourth hour, and sometimes even every hour.

The diet of the patient will be, of necessity, severe during the first days : if there is any fever he must maintain the most rigorous fast, and complete repose, as well as absolute silence.

Toast and water, and gum water, are the most proper drinks during the course of the disease, and they should be given slightly warmed. As soon as the fever subsides you will allow light food, such as beef tea, chicken broth, a small quantity of semolina, arrow-root, or meat jelly ; in a few days the patient may be restored to his customary diet.

The air of the apartment must be kept at an even temperature of about 16° Réaumur, or 68° Fahrenheit scale.

ACUTE LARYNGITIS.—ACONITUM.

Primitive Symptoms.

Pain in the larynx ; a constant desire to cough, produced by an irritation, or tickling in the larynx ; short and dry cough, principally at night.

Consecutive Symptoms.

Cough after having drunk.

Sympathetic Symptoms.

Heat chiefly in the head and face—pulse accelerated.

LARYNGITIS—ARSENICUM.

Primitive Symptoms.

Sensation of dryness and burning in the larynx ; hoarseness.

Consecutive Symptoms.

Catarrh with hoarseness and coryza ; voice rough and hoarse, or trembling and unequal, at one time strong, at another weak : tenacious mucus in the larynx : spasmodic constriction in the larynx.

Sympathetic Symptoms.

Attacks of suffering with anxiety, cold, rapid failure of strength, and wish to lie down : nocturnal sleeplessness, with agitation and constant tossing.

LARYNGITIS—CHAMOMILLA.

Primitive Symptoms.

Burning pain in the larynx : hoarseness.

Consecutive Symptoms.

Spasmodic constriction of the gullet : dry cough produced by a constant titillation in the larynx : expectoration of mucus of a bitter or putrid taste : attack of suffocation as if from constriction in the larynx.

Sympathetic Symptoms.

Constant alternate succession of cold, or of partial shuddering, with partial heat in different parts of the body; disposition to weep and to be angry; taciturnity and repugnance to conversation.

LARYNGITIS—HEPAR SULPHURIS.

Primitive Symptoms.

Hoarseness; pain and great sensibility of the larynx, aggravated by pressure, speech, coughing, and breathing; cough excited by irritation or pain in the larynx.

Consecutive Symptoms.

Weakness of the organs of speech and of the chest, causing a hindrance to speak loud.

Sympathetic Symptoms.

Shuddering and shivering principally in the open air; strong disposition to perspire in the day time on the least effort, and on the least movement; sadness and desire to weep; irritability.

LARYNGITIS—LACHESIS.

Primitive Symptoms.

Continual hoarseness, with a sensation as if there were something in the throat which impeded speech, and which could not be detached.

Consecutive Symptoms.

Dryness, burning pain, as from excoriation in the larynx.

Sympathetic Symptoms.

Shudderings while the heat continues, and principally on lifting up the clothes; heat alternately with cold, shivering or shuddering.

LARYNGITIS—SPONGIA.

Primitive Symptoms.

Hoarseness; pain in the larynx on touching it, and on turning the head.

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Consecutive Symptoms.

Weak, husky voice, which fails in singing and conversation; pressure in the larynx when singing; roughness and dryness in the throat; burning pain in the larynx; dry cough, excited by a burning and tickling in the larynx.

Sympathetic Symptoms.

Frequent shiverings, especially at the back; flushes of heat; timidity and tendency to be frightened.

CROUP.—PSEUDO-MEMBRANOUS, OR CROUPAL LARYNGITIS.

Angina Membranacea, Polyposa; Cynanche stridula, exsudatoria.

Croup is a disease which seldom attacks adults, it almost exclusively affects childhood. Children newly born, or at the breast, are not free from it; but they are far less exposed to it than those who have passed the time of suckling. Croup is sometimes epidemic, without, nevertheless, exerting so general an influence as the exanthematic diseases; sometimes it also appears sporadically. In some cases it follows the changes of the febrile affection, or exanthema, with which it is connected, and may even then be transmitted from one person to another by a real contagion. Setting aside this circumstance, it does not appear to be capable of that system of propagation.

Causes.

The determining cause of this disease is cold, especially a current of sharp air acting on a person in a state of perspiration: for this reason is croup more scarce in summer than in winter, in the south than towards the north. Moist cold is an atmospherical condition most favorable to the development of this disorder.

Symptoms.

First period: Sometimes a simple state of fever, attended by repeated shiverings, heat and harshness of the skin, whiteness of the

tongue, sadness, and dejection, alone constitute this stage; sometimes catarrhal symptoms are evident; there is a real catarrh, coryza, guttural angina, accompanied by fever; unusual dejection, with redness or moistness of the eyes, while the eyelids are surrounded by a bluish circle.

These phenomena may last from one to five days, and are replaced by those of the second stage, or period of inflammation, which succeeds to the first by a gradual transition, not by an instantaneous passage. This change is most commonly noticed in the evening, or else during the night. A pain of more or less acuteness is felt in the larynx, and sometimes even as far as the chest; respiration difficult, whistling, hissing, sonorous; violent cough, dry, short, by repeated fits, harsh, loud, and productive of pain in the throat; it is compared to the clucking of a hen or the crow of a young cock. The voice is hoarse, often shrill and trembling, or else detonating by starts. Deglutition almost always difficult, exciting cough, and renewing the fits of dyspnoea and strangulation.

From time to time the act of breathing becomes more calm and less whistling; the child even recovers a little cheerfulness, although the fever does not disappear; during the paroxysms which follow these remissions, the anxiety is redoubled, the face assumes a bluish red hue, the pulse is small, frequent and hard; the child remains with the thorax raised, the neck extended; sometimes it lies on the side, very rarely on the back. During the intermission of the fits, the pulse loses its frequency and becomes softer and larger.

The application of the stethoscope on the region of the larynx discovers the noises which we have described above; on the chest it discovers signs peculiar to bronchitis. Laennec mentions bronchial, or tubal respiration, unaccompanied by crepitation of the pulmonary cellulae, and existing with a perfect reso-

nance of the thorax, as a sign capable of revealing croup of the bronchia.

In the third stage, or that of collapse, the remissions, if any occur, are but slightly perceptible; dyspnoea assumes more and more violence, respiration appears whistling, and often attended with an occasional noisy rattle, which is attributable to mucus, or to the moveableness of some shred of false membrane. Voice is then quite extinct, the cough is no longer hoarse but whistling, which also happens in the second period, if the child is weak and the disease very severe. Excess of weakness obliges the patient to confine himself to a reclining posture, while the head is thrown back, and the ribs become frequently and forcibly raised; from time to time the child contracts his muscles to perform a deeper inspiration; the uselessness of this attempt is followed by momentary tears, or by a frantic despair and an agitation which only cease with life. In one or the other of these cases, the eyes fill with tears, and appear to start from their orbits; the conjunctivæ are injected, the face is of a pallid hue, with the centre of the cheeks and the lips bluish, the neck becomes tumefied, and sometimes emphysematous towards the lower part; the pulse becomes by degrees weaker and smaller, almost always irregular and intermittent; and a gradual chill pervades the whole body, more especially in the hands, feet, and face, announcing the fatal termination to this painful scene.

Rankness of breath has been observed in these croups, attended by considerable adynamia; it is most often owing to a gangrenous state, especially when this disease is a complication of Variola, or Scarlatina.

Croup sometimes progresses most rapidly towards a fatal termination: it is known that patients have been carried off sometimes in twelve hours, but generally even in the most severe cases, it lasts from forty-eight hours to

eight days, or even more ; and, in favorable cases, it often extends to twice as much time. The third stage is always short, seldom occupying in duration more than one day.

Anatomical Appearances.

There is most usually to be found a membranous concretion of greater or less extent, lining the glottis, the larynx, and occasionally invading the trachea and bronchia ; it varies in thickness, from that of the skin of an egg to nearly the eleventh part of an inch, of a pap-like consistency, similar to the false membranes which are formed on the sores of blisters, and of even greater consistence. It sometimes covers, and at other times is covered by a white, greenish mucus, almost puriform ; under this the mucous membrane is red, tumefied, and speckled with little red spots. In some cases no false membrane has been found, but the swelling of the mucous membrane was so extensive that the aperture of the glottis was almost obliterated.

Mechanism.

It is exactly similar to that of the ordinary laryngitis, which we have just discussed, only it is a higher degree of the disorder attacking infancy. Nevertheless, you must add to this a predisposition to Psora, which subjects the vocal organs to a greater eliminatory process, that it may reject externally at the same time the perspiration that had been checked and the psoric virus. The false membrane, which is often formed in croup, is but the excretion assuming solidity, similar to that dense membrane formed by the excretion resulting from the application of a blister.

The symptoms of croup have a perfectly natural explanation in the mechanism of the disease : the greater flow of blood causes tumefaction of the membrane, hence difficulty in breath and speech.

The secretion of mucus again increases this

oppression, if it is not instantly removed ; lastly, the efforts to reject the mucus or the false membrane add to the difficulty of breathing, as the muscular contractions narrow the glottis already rendered smaller in its orifice, either by the swelling of the mucus, or by the presence of the false membrane. Heat of the larynx is again caused by the greater afflux of blood, and pain by that of the nervous fluid. All the other symptoms are consequences of the former ; we may instance anxiety, flushing of the face during the fits, &c. The fever is explained by the eliminatory process which carries off rapidly towards the mucous membrane, the morbid influence which tends to destroy the organic system.

Prognosis.

Croup is one of the acute diseases that has produced the greatest number of victims, even in our days ; and the cause of this should not be sought for only in (that which is called) the malignity of the disorder, but more in the fact, that its mechanism had remained unknown, and that treatments, all attended with more or less danger, were opposed to a disease little known except by mere empiricism and habit. All that formidable display of symptoms is but the combination of the efforts of the organic system to reject externally the suppressed excretion of the skin, perspiration, and the psoric virus. But up to the present time, all curative methods have had for their object to impede or clog these salutary acts of vitality ; it therefore necessarily occurred, that in very many cases the vital energy, unable to resist the united efforts of so many morbid causes, fell under the redoubled blows of those who believed that they were lending it assistance.

Treated by the old methods, the prognosis is necessarily most serious ; and many cases must undoubtedly be pronounced to be inevitably fatal. But under Homœopathic treatment, croup retains not the slightest aspect of dan-

ger, if taken in time : fatal cases will only be met with as rare exceptions, in individuals of already impaired health, destitute of proper attendance, or when the assistance of therapeutics has been applied to in too advanced a stage of the disease.

Treatment.

In the treatment of croup we notice two principal indications : 1st, rejection to the exterior of the exciting morbid cause, viz., impeded and absorbed perspiration ; 2nd, neutralization of the predisposing tendency to psora.

Aconitum will be administered in the first instance, during the inflammatory stage, called the period of inflammation, and which commonly declares itself by general heat, and acceleration of the pulse ; this is the moment when the vital principle is awakening the organic system to a state of *turgescence*, in order to direct rapidly the morbid cause towards a secreting organ. *Aconitum* is then prescribed, with the intention of favoring the organic movement, whether it be general or local. The dose will be from 1 to 3 globules, of the 3rd, 6th, 9th, 12th attenuation, repeated according to the urgency of the case ;—every hour in serious cases ; every 4th, 6th, or 12th hour, in those which present less rapidity and intenseness in the preservative actions or symptoms of authors.

Spongia is indicated, when, after the use of *Aconitum*, the febrile tendency begins to subside, when the cough is hoarse, hollow, deep-sounding, croupal, and dry, and that there is secreted but little mucus, difficult to raise, when respiration is difficult, noisy, sibilant ; when it imitates the sound of a saw ; when the patient is overcome by fits of suffocation, and that breathing is no longer possible, but by throwing the head back on the shoulders : this medicament is then prescribed, in doses of from 1 to 3 globules, of the 3rd or 6th dilu-

tion. It should be repeated every fourth or sixth hour. *Spongia* joins in assisting the organic action that takes place in the larynx, the result of which consists in the formation of mucous excretions, containing in themselves the exciting cause of the disease, the absorbed perspiration.

After this medicine, *Hepar Sulphuris* is prescribed, in the same dose, when the mucosities begin to be secreted, when the cough appears more full, and that the oppression in breathing is owing chiefly to the presence of accumulated mucus in the aerial passages. However, this medicine is more especially indicated by Psora, which it should attack and neutralize, in order to avoid the false membrane, or to dissolve and expel it, if it exists already.

In the course of the disease, it will always be necessary to bear in mind the indications that we have traced above ; these alone can lead to an understanding of the necessity of varying the medicaments, and of the moment when they should alternate with one another, for we should not always prescribe *Aconitum*, next *Spongia*, then *Hepar* ; it may even often be of great service to begin by *Hepar Sulphuris*, as the latter attacks directly the predisposing cause ; then to pass on to *Aconitum*, which directs the blood towards the secreting organs.

Spongia often should be alternated with *Aconitum* : when it has favored the general and local tendency to inflammation, *Spongia* will lend assistance to the secretive action. Again, after having attacked the Psora by means of *Hepar Sulphuris* we shall return to *Spongia*, if the indication requires that remedy.

Lachesis may be very useful in extremely serious cases, after the use of the above-mentioned medicines. The symptoms indicating it are the following : constant hoarseness, with a feeling as of something in the throat,

which impedes speech, and which cannot be removed; choking, and constriction of the larynx, with sensation of swelling and tenderness.

Children, nevertheless, can seldom or never give these details; but the state is inferred from the great anxiety which preys upon them, and by the great sensitiveness of the larynx under pressure of the finger, the slightest attempt to touch which leads to imminent suffocation; the voice is weak, hollow, and similar to that of a person speaking through the nose. Fainting fits, with dyspnoea, nausea, cold perspirations, fits of asphyxia and of swooning, with loss of senses and motion, pulse tremulous or imperceptible, the whole state bearing a resemblance to death, or sudden failing of all strength.

One globule of this medicine (*Lachesis*) should be given at the 12th, 24th, or 30th dilution, and it may be repeated after one or two hours have elapsed, should the necessary indications for it still remain; otherwise it is recommendable to return to the medicines already mentioned.

Croup may be attended by a complication of bronchitis, of pneumonia, or of affection of the brain, &c. We refer for them to the articles especially devoted to these diseases.

During the whole course of the disease, the patient must be kept in total abstinence from food; he is to be allowed only a small quantity of toast-and-water, or gum-water slightly sweetened, and rather tepid.

CROUP—ACONITUM.

Primitive Symptoms.

Pain in the larynx; short and dry cough, principally at night.

Consecutive Symptoms.

A convulsive cough, hoarse and croaking, sometimes with danger of suffocation, and constriction of the larynx.

Sympathetic Symptoms.

Dry, burning heat, sometimes with extreme thirst; heat, chiefly in the head and face, with redness of the cheeks; continual sweat, especially on parts that are covered; pulse hard, and frequent; apprehension, fear, changeable humor, at one time sad, depressed, irritable, and despairing, at another time gay, excited, full of hope.

CROUP—HEPAR SULPHURIS.

Primitive Symptoms.

Hoarseness, permanent pain in the larynx, aggravated by pressure, speech, coughing, and breathing.

Consecutive Symptoms.

Attacks of dry, rough, and hollow cough, with anguish and suffocation, often ending in lachrymation; cough, with abundant expectoration of mucus; anxious, hoarse, wheezing respiration, with danger of suffocation on lying down; attacks of suffocation, which force the patient to throw back the head.

Sympathetic Symptoms.

Starts at night during sleep, as if from want of air, with lamentation, and great general anxiety; flushes of heat, with sweat, burning, feverish heat, with redness of the face, and violent thirst; anxiety, and extreme apprehension, ill-humor, sadness, and desire to weep.

CROUP—SPONGIA.

Primitive Symptoms.

Hoarseness, sometimes with cough and coryza; pain in the larynx on touching it, and on turning the head; sensation of obstruction in the larynx, with impeded respiration.

Consecutive Symptoms.

Hollow, dry cough day and night, increased towards evening, and sometimes with pain in

the larynx; dry cough, excited by a burning and tickling in the larynx.

Sympathetic Symptoms.

Pain in the chest with dyspnoea.

Heaviness of the body, excessive moral and physical dejection; frequent shiverings, flushes of heat; pulse hard and quick; timidity; tendency to be frightened; inconsolableness and weeping.

CROUP—LACHESIS.

Primitive Symptoms.

Dry, short, suffocating, and croaking cough.

Consecutive Symptoms.

Attacks of suffocation, especially on lying down in the evening or in bed at night, and principally when anything is placed before the nose and mouth; contraction and constriction of the larynx, with a sensation of swelling and of tension; voice weak, cough often fatiguing, the utmost efforts of which can detach nothing, excited mostly by a tickling in the larynx.

Sympathetic Symptoms.

The cough is at times attended by vomiting.

Dry heat, principally at night, or in the evening, often accompanied by agitation and tossing, headache, delirium, insatiable thirst; rapid prostration of strength; pulse frequent, feeble, irregular; great anguish, mental dejection, fear.

WHITE OF EGG.

White of egg, dissolved in a suitable quantity of water, and taken in the form of a potion, is one of the most efficacious remedies against poisoning by *metallic* substances, and principally against *corrosive sublimate, mercury, verdigris, tin, lead, sulphuric acid*, especially if the patient experiences urgent pain in the stomach or abdomen, with urgent and violent desire to evacuate, or diarrhoea, with pain in the anus.

OF THE

REMEDIES

WHICH

ALLOPATHY EMPLOYS ACCORDING TO THEIR
HOMŒOPATHICITY.

STRAMONIUM.

Whatever may be the antipathy of the school, or of Allopathy to the doctrine of Homœopathy, as it is impossible for error to avoid paying homage to truth in some manner, the Allopathists use daily, and recommend in their books and journals remedies, against diseases, to which the latter are entirely Homœopathic. Already, in his immortal *Organon*, HAHNEMANN has collected numerous examples of this fact in Allopathic practice, in regard to forty medicinal substances, employed and extolled precisely in the cases in which Homœopaths employ them at the present day. Without proposing to complete the immense task of the master, and to hunt up in the old practitioners all the cases of accidental Homœopathy, we propose to show, that the Allopathic physicians of our day corroborate, by their daily practice, the teachings of *Hahnemann*, and prescribe with the greatest success remedies, which, administered to healthy individuals, and in certain proportions, would throw them into a state of disease very similar to that which these medicines cure by their means.

Far from reproaching them therefor, from blaming them for this practice, from showing them that they act contrary to their principle *contraria contrariis*, we intend to point out to them the injustice of incessantly and every

where acting *against* us, while they daily act, though unintentionally, *with* us.

Before proceeding to our subject, we lay down, as an invariable principle, that Homœopathy consists entirely in the *specificity* of the remedy applied to each case, and that the choice of the remedy should be rigorously determined by the nature of the symptoms which this remedy is capable of producing on a healthy person, symptoms as similar as possible to those presented by the disease to be treated. It seems useless, at the present day, to lay down this principle for the hundredth time; but we deem it our duty to do so, because we hear some Allopathic physicians say that Homœopathy consists in the administration of infinitesimal doses, and that as soon as a physician abandons these doses he practices Allopathy. This is a mistake, perhaps an intentional one; the employment of small doses results from a very logical deduction, viz., that we cannot too greatly diminish the acting mass of a substance capable of increasing, even for a moment, the sufferings of a human being; but this custom, although a very wise one, is but a *modus agendi*; and a physician remains a Homœopathist, and a pure one too, even when he experiments with gradual doses, provided he employs but such medicines as he knows to be Homœopathic to the case he has to treat.

We now approach the examples which make for our principle; and without giving ourselves much trouble, we will take them from the *Journal de Médecine et de Chirurgie Pratiques*, where we find them collected very conveniently for our use.

In the first volume, p. 3, we read that, the *tincture of seeds of the thorn-apple (datura stramonium)* is extolled by Dr. Amelung, of Hofheim, in several diseases, and principally in *acute mania*; it there acts as a sedative, and is suited accordingly to the beginning of the greater part of mental affections, which

generally present at that period, agitation, insomnia, a more or less strongly marked erethism of the sanguineous system.

Let us stop here, and prove by some quotations, that no substance is so Homœopathic to mania as the *datura*, and that Dr. Amelung, or his French editor, has taken no account of the primary effect of this plant, since he designates it as *sedative*, but that he has considered only the secondary effect, which constantly takes place, to the great benefit of the patient, when we administer the remedy in a case strongly resembling the symptoms that it produces.

We read, then, in the *Materia Medica Pura*, concerning agitation —

“He runs with extreme rapidity, with all his might, when he wants to go from one place to another.—(*Franz*).”

“Extraordinary excitability; he moves so rapidly (during the first hours) that at length all his motions stop, and a dark veil covers the eyes.—(*Id.*)”

“He performs all his motions with such precipitation and force, that he is amazed when he cannot execute them at once.—(*Id.*)”

“Troubled sleep.—(*Greding*).”

“Sleep very much troubled, with tossing.—(*Id.*)”

“After a troubled sleep, violent headache, vertigo.—(*Id.*)”

“Sleep interrupted by cries.—(*Id.*)”

“At night cries and howls.—(*Id.*)”

“He awakes crying out.—(*Id.*)”

“He lies awake all night, tosses about incessantly in bed, and utters a shrill cry.—(*Brera*).”

“Insomnia.—(*Swain, Greding*).”

“Violent motions of the limbs.—(*Pfennig*).”

“Continual motions of the hands and arms, as if he were weaving, (after eight hours.)—(*Id.*)”

“Convulsions.—(*Kaw Boerhaave, Dœderlin, Buchner*).”

"In bed the most violent convulsions, which render him furious (after six hours.—(*Brera*)."

"Frightful convulsions at the sight of a light, of a mirror, or of water.—(*Id.*)"

"The convulsions and delirium are especially excited by being touched.—(*Lobstein*)."

"Spasmodic motions.—(*Witt*)."

"Spasms, at first in the left arm, then in the right thigh; at length very rapid spasms of the head in every direction.—(*Greding*)."

"He throws his limbs about incessantly.—(*Kelner*)."

"Violent convulsive motions of the muscles, of the lower jaw, of the hips, of the left arm and of the right leg. (Orfila quoted in the *Reine Arn. von. Hartlaub und Trinks*)."

"Tetanic state.—(*Meigs, eod. loc.*)"

Assuredly, it is difficult to grant a primary *sedative* to a substance whose effects are so enormously exciting; and let us not forget that the majority of the observers quoted are Allopaths, who little dreamed of making the facts noted by them, square with the Homœopathic doctrine. But for us, who recognize and adopt the latter, it is incumbent on us to remark that this powerful excitant, *datura*, becomes sedative from the moment we apply it Homœopathically and in suitable doses.

We have said above, according to *Ame- lung*, that "the *datura* is a sedative where there is an erethism more or less strongly marked, of the sanguineous system;"—now, the following are the symptoms quoted by *Hahnemann* as relative to this state.

"Pulse small, frequent, quick, irregular.—(*Brera*)."

"Pulse strong, full, from 80 to 90 pulsations.—(*Pfennig*)."

"Pulse hard and full.—(*Velsen*)."

"Violent fever.—(*Rush, Greding*)."

"At noon, high fever, which returns with violence at midnight.—(*Id.*)"

"After the vomiting of the evening, violent

continued fever, with much perspiration.—(*Id.*)"

"Every day, fever, after noon.—(*Id.*)"

"Towards noon, great heat, redness of the face, vertigo and involuntary flow of tears.—(*Id.*)"

"Great heat, with quick and small pulse, and face deep red."

"In the evening, heat above the knee, in walking, and heat over all the body, with the most violent thirst (at the end of twelve hours).—(*Franz*)."

"Heat over all the body.—(*Pfennig*)."

"Great heat of the body.—(*Gardane, Lobstein, Meigs*)."

"Abundant sweat.—(*Grimm, Greding Brera*)."

"Eruption over the whole body, with swelling, inflammation, and itching.—(*Rush*)."

"Vesicles.—(*Witt*). Pustules.—(*Pfennig*). Itchy eruption.—(*Vicat*). Miliary.—(*Greding*)."

It is then evident that the *datura* quiets the erethism which it is its nature to produce: Homœopathicity.

Below we now give some of the symptoms of *mania*, more or less *acute*, by virtue of which, according to our views, the *datura* is a powerful curative means of that disease.

"Delirium.—(*Rush, Pfennig*)."

"Loss of spirits (at the expiration of 24 hours), slight delirium.—(*Kellner*)."

"He is not perfectly in his right mind.—(*Cruger*)."

"Loss of understanding.—(*Kaw Boerhaave*)."

"Dementia.—(*Swaine*)."

"Mental alienation.—(*Fowler*)."

"Hebetude, loss of intelligence.—(*Pfennig*)."

"Confusion in the head.—(*Odhelius*)."

"Fantastic imaginings.—(*Ray*)."

"Raving loquacity, absurd chattering.—(*Swaine*)."

"He raves, he has lost his memory, and has not possession of his senses.—(*Brera*)."

"The patient, having lost his spirits, is filled with a thousand images, not disagreeable, makes his desires known by signs, without speaking.—(*Sauvages*)."

"At night he dances in the burying ground.—(*Id.*)"

"Dementia (at the end of three hours); he dances, capers; bursts of laughter and singing.—(*Grimm*)."

"He is, as it were, in an ecstasy, and out of his head.—(*Cruger*)."

"The mental alienation manifests itself in his gestures.—(*Duguid*)."

"Mental alienation, groans.—(*Costa*)."

"By spells, he chatters incessantly, or becomes furious, and bursts into fits of laughter.—(*Greding*)."

"He beats the assistants, uttering frightful cries, and becomes furious.—(*Id.*)"

"He bites an assistant in the hand.—(*Fowler*)."

"Fury.—(*Vicat.*) Furious delirium.—(*Kramer*)."

"Fury that nothing can appease.—(*Schroer*)."

"He cannot be kept in bed but by force.—(*Fowler*)."

"Unbridled rage; he cannot be restrained, he attacks the attendants, strikes them, and endeavors to grasp them.—(*Swaine*)."

"Great desire to bite and to tear with his teeth every thing that comes near his mouth, even his own limbs.—(*Brera*)."

Et plura alia.

Consequently, no Homœopathist will be surprised at what Dr. Amelung affirms, "that in periodical insanity, we are enabled, by the prolonged use of the tincture of *datura stramonium*, to render the attacks less violent, and the lucid intervals of longer duration;" and that he even allows to this remedy a more direct action than to all those which have been

hitherto celebrated; this follows, we believe, from the fact that the *datura* is found more Homœopathic than *those other remedies*.

"In chronic and incurable mental diseases, the thorn-apple, according to this physician, shortens the duration and lessens the intensity of the attacks of periodical irritation, which are so frequent, and he finds it preferable, in most cases, to opium, belladonna or digitalis."

This last quotation was written as a novelty, in 1830; and yet, in the third edition of his *Materia Medica Pura*, which appeared in 1825, (we cannot now lay our hands on the other editions,) Hahnemann already said: "But, and here I speak from experience, what curative virtue, not to be compared to any other, does not the Homœopathic application of the moral diseases, provoked especially by the thorn-apple, possess against the natural analogous mental diseases, and how useful is this plant in convulsive affections analogous to those produced by it!"

It is, then, to Hahnemann, and not to Dr. Amelung that we must refer the employment and success of the *datura* in cases of mania, as well as "in epilepsy, convulsions and catalepsy;" affections clearly pointed out in the following pathogenetic symptoms:—

"Convulsions of the limbs."

"Immobility of the limbs, (sort of catalepsy)."

"Trembling of the lips, of the hands and of the feet.—(*Kaw Boerhaave*)."

"Locked-jaw, with closed lips.—(*Id.*)"

"Sanguinolent foam from the mouth.—(*Unzer*)."

"Slaver from the mouth.—(*Brera*)."

"Spasmodic tension of the lower limbs.—(*Franz*)."

"Syncope, with great dryness of the mouth.—(*Greding*)."

"Stertorous breathing during the syncope.—(*Id.*)"

"Stiffness of the body.—(*Heim*)."

"Constant cramp of the hands and feet.—(*Greding*)."

"The fists are clenched and may be opened.—(*Kaw Boerhaave*)."

"Convulsions, violent jerks.—(*Franz*)."

"Spasmodic jerkings of the limbs.—(*Id*)."

"Alternate contractions of the hands and feet.—(*Lobstein*)."

"Every one knew already," continues the journal, "that fumigations made with the roots and stem are occasionally of great benefit in nervous asthma."

This curative effect is the Homœopathic consequence of the following symptoms:—

"Difficulty of respiration."

"Oppressed respiration."

"Pressive pain in the chest and sternum, excited by the act of speaking."

"The chest is strongly constricted across.—(*Swaine*)."

"Violent pressure in front, on the cartilages of the third and fourth ribs, with difficulty of respiration, (at the end of half an hour).—(*Franz*)."

"Oppression of the chest and extraordinary pains.—(*Witt*)."

"Anxiety around the pit of the stomach, with difficulty of breathing.—(*Greding*)."

"The respiration is more and more impeded, and the face becomes blue.—(*Id*)."

"Slowness of inspiration, and extreme rapidity of expiration.—(*Kaw Boerhaave*)."

"M. Amelung," continues the journal, "has, further, established the efficacy of the internal and external use of the tincture of stramonium against the cramps in the calves of the legs, which sometimes so painfully affect pregnant women, and he concludes his memoir by some observations on chronic rheumatism, cured by this method."

"Before M. Amelung, *Hahnemann* had already said: (*Mat. Med.* p. III, 283), when taken in a suitable dose, it calms some muscular spasmodic movements;" and in advising

its use against *cramps*, he relied on the following symptoms:—

"Tractive pains in the thighs."

"Convulsions of the limbs."

"All his limbs pain him."

"Impossibility of moving the arms and legs of the child, (at the end of an hour).—(*Heim*)."

"Continual cramp in the hands and feet.—(*Greding*)."

"Spasmodic tension of the lower limbs, (at the end of thirty-six hours).—(*Franz*)."

With regard to *rheumatism*, here again we have the pathogenetic symptoms of the *datura*; for there is not a single point of the practice of Dr. Amelung which is not entirely Homœopathic.

"Tractive pain (rheumatic), which extends from the side of the neck to the limbs.—(*Greding*)."

"Rheumatic pain in the side and in the back.—(*Id*)."

"Small and sharp dartings in the fore arm, and constrictive rheumatic pain in the deltoid muscle, (at the end of thirty-two hours).—(*Franz*)."

"Violent pain in the loins.—(*Greding*)."

"Heat and itching in the legs.—(*Id*)."

"Rheumatic drawings in the left instep, in the evening (at the end of thirty-six hours).—(*Franz*)."

"Heat in the instep, sometimes greater and sometimes less, (at the end of twenty-four hours).—(*Id*)."

We cannot then in any manner deny to Homœopathy the knowledge and the use of the *thorn-apple*; it is expressly in those cases in which its pathogenetic effects indicate its employment, that it has become a heroic medicament in the hands of a practitioner, who, (very probably) being a German, was acquainted with *Hahnemann's* works, but who took good care not to point out the source of his pretended therapeutic inspirations. We need not here give notice that as often as we shall

meet in a medical journal or elsewhere, the use of the *datura* according to the instructions or the examples of Dr. Amelung, or any one else, we shall claim it for our doctrine. * * *

Before closing this account of the use of the *datura stramonium*, we will give some examples of cures effected by its means, under the direction of Homœopathic physicians, at periods anterior to the publication of the *Journal de Médecine Pratique*, which gives neither the work from which it has extracted the Memoir of Dr. Amelung, nor the date of the edition.

Convulsions, Epilepsy, Catalepsy.—In 1822, STAFF relates the cure, at Berlin, in three weeks, of a case of *Chorea*, by Ignat., Puls., and Stram., of each one dose (*Archiv. I. iii. 109*).

In 1823, GROSS inserted in the Archives the detailed observation of a spasmodic affection, choreiform, cured by a single drop Stram. 3. —(*Archiv. II. i. 85*).

In 1825, GROSS gave the details of a chorea, remarkable for the violence of the spasms, which was cured by one dose of Stram., followed, twenty-four hours after, by a dose of Bell.; in a fortnight after, a dose of Puls. put an end to a trace of spasm in the arms.—(*Archiv. IV. i. 151*.)

In 1828, ÆGIDI communicates the account of a chorea, which he has completely cured by a single dose of the 9th dilution of Stram., (*Archiv. VII. ii. 73*).

In 1829, KRETCHMAN states that he has several times effected the cure of chorea, by means of Ignat., Bell. Assa and Stram.—(*Archiv. VIII. i. 71*).

In 1825, H. RUCKERT gives the complete history of a catalepsy, which he cured by a single dose of Stram. 3; a single drop of Puls. 4 sufficed to put an end to the anorexia and insomnia, five days after.—(*Archiv. IV. ii. 60*.)

In 1830, DR. RUCKERT published the detail-

ed account of a chorea in which he employed Stram. 6., one drop; but, not deriving from it a sufficiently prompt relief, he followed it by Ignat., alternated with Assa., Cham. and Hyos., followed by entire cure; the subject had been treated six years previously to 1830, and his health had not failed.—(*Ann. I. 139*.)

In 1828, GROSS remarks the advantage he derived from Stram. in the treatment of epilepsy.—(*Arch. VII. ii, 114*).

In 1830, RUCKERT gives the complete account of a case of convulsions which he treated successfully by Stram. 9, gtt. i.—(*Ann. I. 304*).

The same year, was published in the same collection, the history of a case of poisoning by the seeds of Stramonium, in which precisely the same convulsions presented themselves, that we cure by the use of the same substance.—(*Ann. I. 311*).

In 1830, Dr. Bethmann makes known the success he has obtained from a single dose of Stram. 5, preceded by a dose of Aconite 8, in a case of tetanic affection in a child, 9 months old.—(*Ann. I. 309*).

MENTAL AFFECTIONS.

In 1824, RAU publishes a case of mental alienation, accompanied by choreiform motions, cured by Stram., preceded by Bell., given for another symptom.—(*Ueber der Werth, etc., 191*.)

In 1830, TRINKS communicates a case of mental alienation, cured by a single dose of Stram.—(*Ann. I. 230*).

In 1826 we read in the *Communications Pratiques*, an account of mental alienation with fever, heat, thirst, &c., cured by Stram.—(*Prakt. Mittheil. 55*).

Dr. Gunther, Allopathic physician at Cologne, had also published, in 1829, in the 11th number of *Hufeland's Journal*, a case of mental alienation cured by tincture of Stram. seeds, given in the same doses as by Dr. Amelung.

In 1822, Dr. Moritz Muller mentions the cure of a mania by very small doses of Stram.—(Arch. I. i. 25).

In 1823, Dr. H. Ruckert communicates a case of mental alienation, with mania, which had resisted the Allopathic treatment, and yielded to a drop of Stram. 3, followed, according to the remaining symptoms, by Cocc. and Nux, some days after.—(Arch. II. i. 91).

In 1825 the same physician publishes the account of a case of melancholy, in which he administered Stram.; he was wrong; the mental alienation produced by Stram. is furious rather than quiet; accordingly, this remedy did not at all cure the patient; it exasperated the disease, and rendered it furious from being quiet, but without advantage to the patient, to whom it became necessary to administer other remedies. This case furnishes an excellent lesson, viz., that we must not say, in general terms, that the *thorn-apple* cures mental alienations, but that it accords Homœopathically with those affections which are accompanied by delirium, violent motions, cries and convulsions.

In 1825, Dr. Schweikert gave the detailed account of a mental alienation, with violent agitation, cured by two doses of Stram. followed by Hyos. and Verat.—(Arch. IV. i. 102.)

In 1827, Dr. Spohr communicates a case of mental alienation, in which the Stram. rendered him great service in quieting some symptoms, but did not suffice to cure the patient.—(Prakt. Mittheil. 53).

In order to complete the publications which Homœopathic physicians have made concerning the curative action of Stramonium in the cases vaunted by Allopathy, let us further point out some observations which have appeared since 1830.

In 1832, Dr. Bethmann gave the history of a chorea, which yielded to one dose of Stram. 9.—(Ann. III. 438).

In 1833, Dr. Hoffendahl published in minute

detail the account of a chorea, in which he employed with some success Stram. 6, but in which he was obliged to combat by other drugs the remaining symptoms, which corresponded to them.—(Ann. IV. 265).

The same physician has given also a case of epilepsy, in which Stram. exhibited a great healing power.—(Ann. IV. 271).

We have here enough testimony to justify our claim in favor of the Homœopathic and curative application of the *Datura Stramonium*. In reviewing, in like manner, some other substances, we will show with equal ease what right we have to claim the cures which the Allopaths constantly take to themselves; by this examination we shall obtain, we hope, the assent of all reasonable men, who will comprehend the whole reality and truth of the doctrine of Hahnemann, and of the use which we shall continue to make of it.

C. P.

THE MEDICAL SOCIETY OF PHILADELPHIA.

ITS ZEAL AGAINST QUACKERY.

TO THE EDITOR OF THE HOM. EXAMINER.

GENTLEMEN,

The following lines have been hastily written, in order that a timely notice might be taken of the impertinent and self-sufficient proceedings of the society alluded to. They are written by a friend to the cause, who will endeavor to furnish from time to time articles which may add to our stock of knowledge, and contribute to the development of our principles and practice.

A LAYMAN.

Philadelphia, April 20, 1843.

“ Any Member of the Society shall forfeit his Membership, by any one of the following acts.

“ 4th. Practising or sanctioning any system

of quackery or imposture, including what is called Homœopathia."

The above, with other resolutions, was adopted at recent meetings of the Philadelphia College of Physicians, and Philadelphia Medical Society—we congratulate the practitioners and friends of Homœopathy upon its announcement. We could furnish them with no more convincing evidence of the progress of our true and beautiful science. The war is indeed in Africa; not that we wish to convey the idea that the "brutum fulmen" of these societies, the latter more especially, is worthy of notice, but that this movement plainly indicates that the chief actors in the deep and disastrous tragedy of Allopathy, so long enacted with impunity, are dismayed at the steady and rapid march of Homœopathy.

For the information of our readers out of the city of Philadelphia we may state that, the Medical Society of that city was instituted by a few estimable and venerable physicians, for the sole purpose of improving medical students in writing and disputation. By intrigue these gentlemen were soon displaced by individuals who have since made it a place for the display of their own dialectical skill, and for the utterance of crude and stupendous errors. Here they descant learnedly on Pathology, asserting very positively that, if an individual die of delirium, fever, or pain, and a small red spot is detected, upon dissection, such spot was the cause of death! Here it is that young men, anxious for practical information, have their minds bewildered with explanations of the means by which spiders breathe, and the shape and size of the small atoms composing the different fluids and solids of the body—that the nervous fluid cannot be seen with the microscope, therefore the nervous fluid is a humbug.

Here, likewise, are taught the great doctrines and practice of Allopathy; they can be put in a nut-shell, viz., if a person complain

of pain or fever, first bleed generally, next topically, then blister and blister again, or keep the raw surface discharging, by the application of basilicon—or, instead of Cantharides, irritate the skin with Tartar Emetic or Croton Oil—at the same time purge with Calomel and Jalap, or refrigerating cathartics. Embellish the treatment with neutral mixture, minute doses of Tartarized Antimony, or sweet spirits of Nitre, and never forget to keep the bowels in "a soluble state"—and as the patient succumbs, alter the whole treatment, although the symptoms, with the exception of debility, remain unchanged, and give wine whey, volatile alkali and milk punch.—Should the vital powers withstand this fierce assault, and the credulous victim not die, cured; give him, through a long and wearisome convalescence, blue mass or Iodide Potassae!!

That this is the sum total of Allopathic treatment, can be attested by the melancholy experience of every family—and what science and learning, we ask, are requisite to follow it? It is true that it is based upon an hypothesis composed of an immense mass of facts, cemented together in some places, skilfully, considering their incompatibility, but for the most part clumsily, and with manifest looseness; an incongruous compound, in which coincidence is mistaken for relationship, cause for effect, and effect for cause—in which error, from long continuance, has so exactly assumed the semblance of truth, that its detection is either obstinately opposed, or its deception wilfully sanctioned.

From what we have just said let it not be supposed that we oppose science or learning, on the contrary none feel their importance more than ourselves. The mere fact of our being disciples of Homœopathy, in its correct signification, attests our sincerity. For Homœopathy embraces an amount and variety of research and knowledge, of which Allopathy

has but a faint conception, and to which an approach only has been made in pathology, and the more recent discoveries in physiology—it demands from its pupils a vigilance which allows no fatigue, and a comprehensiveness of inquiry which defines no limits. Though yet in its infancy, it has subjected to unparalleled scrutiny those branches of medicine which have been the immediate objects of its investigations.

The vulgar assertion, therefore, that any person, with even less knowledge than is possessed by the majority of Allopaths, can prescribe properly for disease, is either wilful misrepresentation or sheer ignorance. It is true that there are many uneducated individuals who style themselves Homœopathic physicians; but cannot the same remark be made in regard to pretenders to Allopathy. And ought not the success of the former suggest the thought to observant minds, that they may be possessed of means which, under the guidance of skill and science, might prove powerful instruments for the cure of disease.

That these pretenders, professing an equality of ability with those of regular education and tried experience, and who, from conscientious conviction, have abandoned Allopathy, injure and retard the progress of our system we certainly know; and all judicious measures for the suppression of quackery or imposition, in whatever forms they may present, have not only our sincere approval, but shall have our most active co-operation. We should even commend the efforts of the Philadelphia Medical Societies, and disregard the disgrace which they seek to attach to Homœopathy, by connecting it with quackery, could we approve the mode and manner of their action.—Purity of motive, where time is given for deliberation, could never exhibit the acrimony which these resolutions breathe; while through their constrained disguise, pique and personal mortification are plainly discernible; besides,

their absolute want of knowledge of human nature is calculated to defeat the object they seek to attain. Were Homœopathy the imposture they represent, and did we not feel confident that being the cause of truth it must prevail, policy would dictate the suppression of the opinion now given.

Quackery and imposture ever envelope themselves in secrecy and mystery, and Allopaths avail themselves of every opportunity to induce the belief that such artifices are had recourse to by those who practice Homœopathy. How individuals holding respectable, many of them exalted stations in Society, can conscientiously make such accusations, is among those seeming anomalies in the operations of the human mind which the metaphysician can explain—for never was a system more openly promulgated, nor more solicitous of examination. In its great outlines as well as in its simplest details, so far from avoiding, it seeks, and invites the most critical inquiry. Let the result be the test of its truth. Humanity and the cause of science demand it at the hands of those to whom the lives and happiness of the community are entrusted. Those trials which have been already made—and they have been repeated again and again—have always been favorable to Homœopathy. And they have been made, not by the illiterate and unlearned, but by individuals whose characters for judgment, ability, and unsuspected and exemplary worth are in every respect quite equal to those of any who decry or ridicule the system.

To the well-informed, the persistence of opposition which Homœopathy encounters, creates no surprise; the history of human nature furnishes numerous instances of the determined opposition with which the announcement of a new truth is always received. The lives of Harvey, Galileo and Jenner are familiar examples. Long established prejudices and education throw around us a veil, through

which the light of truth with difficulty penetrates. Chinese physiology teaches that the veins contain air, and although the physicians of the celestial empire are, perhaps, the daily witnesses of blood flowing from them, yet we doubt whether the united wisdom of the Philadelphia societies could succeed in changing their opinion.

Although the term, "Homœopathia," is productive of so much ire in the breast of the indomitable Allopath, who, by the way, practises it unwittingly, whenever he practices successfully, yet it is the small doses which excite his superlative indignation, and upon them is poured out the vials of his wrath.—They invariably elicit the epithets "humbug," "charlatanism," &c., which terms have become, par excellence, diagnostic of his peculiar, we had almost written specific, frame of mind.

Whenever a small dose of medicine is mentioned, his ideas immediately revert to the calculations of Allopathic wags, who aver that the seventeenth dilution is equal in bulk to ten Adriatic seas, and the fact of being obliged to swallow ten oceans, with all the calculations which have been made about them, is a dose from which it is not surprising the veteran prescriber of "Chlorid. Hydrargyri Mitis gn X, et pulv. Jalap grs. xxx. m. Sig. To be taken at a dose, in a tablespoonful of syrup or sweetened water," may well draw back in doubt and dismay. How nugatory and ridiculous, however, are these mathematical abstractions, when, by reference to works on Homœopathic pharmacology, it can be ascertained that the seventeenth dilution of any medicine may be prepared with three ounces of Alcohol—a drop of which constitutes, in a great majority of instances, a dose.

It is, moreover, difficult to understand, that, while so tenacious of the belief that, no quantity of any medicine can produce an effect upon the animal organism, unless cognizable

by the senses, he overlooks the fact that many articles which are prescribed by Allopaths, are in quantities too minute to be thus recognized.

If only the external senses are the tests of power, how is the existence of malaria ascertained?—and does the inability thus to detect them, warrant a denial of their reality. But it were useless to multiply instances of the effects produced by infinitesimal causes.

In physics we are presented with many examples. From among the number we select the waves of sound which fill the air of a concert room, during the performance of a difficult piece of music by a full orchestra—millions and millions of these waves are passing, repassing, and crossing each other in every direction, and yet not a single one interferes with another, while each preserves its form entire, and performs its duty unmolested. Nevertheless, that these sounds may be appreciated by a correct musical ear, the tympanum of the listener must vibrate more than 1920000 times in a minute! Wonderful, however, as this is, who, that pretends to a superficial knowledge, only, of acoustics, ventures to doubt its truth?

But we have neither leisure nor space to pursue this subject further. Public teachers and professors of Allopathy, whose interests, pride, and prejudices close their intellects to every thing which does not accord with their preconceived notions and dogmas, will be among the last to acknowledge the truth of the doctrines and practice of Homœopathy. Those young men, also, who are basking in the sunshine of professional patronage, and whose motto is "in verba magistri jurare," will violently oppose it. For they have not yet had practical experience enough to know the unsatisfactory and fatal results of Allopathic practice—they, moreover, indulge the hope that, the calibre of their intellects will be estimated by the amount and intensity of their abuse.

Its friends will start up from among the in-

dependent and reflecting part of the medical profession, from among those not connected with medical schools or cliques, whose chief aim is the speedy restoration of their patients to health, and a conscientious discharge of their responsible duties in the eye of God.

Nor let the student of medicine be deterred from a candid investigation of Homœopathy, from the dread either of the frowns of his teachers, or the anathemas of societies under their immediate control. The many deaths among relatives and friends, while undergoing the severe medical treatment of purging, blistering, but above all, venesection, "that most fearful and fatal of all medical errors," as Bulwer justly observes, cannot fail to create a doubt lest the art of Allopathy has not reached that degree of certainty, which it so arrogantly boasts, but that there is most serious and grievous error somewhere. On the other hand, when he hears from every quarter, and from sources entitled to his respect and confidence, of the numerous cures daily effected by minute doses, prescribed according to the doctrines of Homœopathy, let him, while his college recollections are still fresh, remember the words of the inimitable Flaccus, "aude sapere."

COMPARATIVE RESULTS OF

HOMŒOPATHIC AND ALLOPATHIC TREATMENT,

IN THEIR RESPECTIVE HOSPITALS.

The following tables as published in Hygea, vol. xviii. p. 2, 1843, were collected by Councillor Kurtz, physician to a princess of Prussia, and an eminent Homœopathic practitioner. The works used in the collection of these data were, 1. Hygea, i. 472. 2. The same,

xiii. 553. 3. J. J. Knolz, Dar. 2. Stell. der Hum.—u. Heilanst. u. s. w. Wien, 1840. 4. Cless. Med. Statistik der innerl. Abth. des Catharinen Hosp. zu Huttgart. 5. Journal für nat. u. Heilk. herausg. v. d. Kaiserl. Med. Chir. Akademie zu St. Petersburg. As regards the Homœopathic Institutions, the different reports in 1. Jahrb. d. Hom. Heilanst. zu Leipzig. 2. Stapf. Archiv. der Hom. Heilk. xviii. 2, 141, xix. 2, 106, 108. 3. Thorer, Prakt. Beitr. im Geb. d. Hom. iv. 70. 4. Vehsemeyer u. Kurz., Med. Jahrb. der spec. Heilk. iii. 502. 5. Allg. Hom. Zeitung, xxi, 47, 89. 6. Hygea, viii. 311, 314, 325, xii. 223, xiv. 357, 7, Knolz. Darstell.

PROPORTION OF DEATHS TO THE NUMBER OF CASES TREATED.

ALLOPATHIC INSTITUTIONS.

	Died in 100
Berlin, Charité,	1796-1817 . . 16—17
"	1831 . . 14—15
"	1838 . . 11—12
"	1839 . . 10—11
" Institution for patients able to pay	1839 . . 11—12
" Klinik of Proff. Bartels (year not stated)	. . 7—8
Breslau, Allsaints hospital	1831 . . 18—19
" "	1838 . . 17—18
Dresden, City hospital	1816 . . 14—15
" hospital for the indi- gent	1839 . . 11—12
Leipzig, St. James' hospital	1838 . . 11—12
" hospital for the poor	1839 . . 2—3
Gottingen, Polyclinique	1838-9 . . 2—3
Hamburg, General hospital, 5th report	6—7
Paderborn, hospital	1831 . . 8—9
Wurzburg, Julius hospital	1835 . . 6—7
Munich, General hospital	1813-32 . . 7—8
Vienna, General hospital	1826 . . 16—17
" "	1838 . . 13—14

		Died in 100			Died in 100
Vienna, Provincial house of correction	1838 ..	5—6	Paris, Cochin	1822 ..	12—13
" Inquisiten hospital	1838 ..	3—4	" Beaujon	1822 ..	16—17
" Prof. Heldenbrand clinique	1824 ..	3—4	" St. Louis	1822 ..	6—7
" Brethren of charity	1830 ..	10—11	" Venereal hospital	1822 ..	2—3
" " "	1838 ..	8—9	" Maison Roy. de Santé		17—18
" Elizabeth sisters	1830 ..	7—8	" Val de grace, under Vaidi, Desgenettes, Pierre	1815-19 ..	5—6
" " "	1838 ..	9—10	" Val de grace, under Broussais	1815-19 ..	7—8
" Lunatic Asylum	1838 ..	20—21	Brussels, St. Peter's hospital	1823 ..	11—12
" St. Mark's	1838 ..	20—21	Amsterdam, St. Peter's hospital	1798-1817 ..	8—9
Mauerback, near Vienna		15—16	Turin and Genoa	1821 ..	14—15
Ybbs, in Austria		16—17	Milan, Large hospital	1812-14 ..	16—17
Pesth, Citizen hospital		16—17	Pavia, St. Matthews	1823 ..	9—10
Lemberg, Austria, General hospital		11—12	Bologna, Tomassini's clin.	1816-19 ..	12—13
Stuttgart, St. Catharine's hospital	1828-29 ..	2—3	" " year not stated		5—6
" " "	1829-30 ..	2—3	Padua, Brera's clinique do do		8—9
" " "	1830-31 ..	2—3	Leghorn do do		13—14
" " "	1831-32 ..	3—4	London, St. Thomas's hosp.	1803-13 ..	6—7
" " "	1832-33 ..	3—4	" St. George's hosp.	1825-27 ..	11—12
" " "	1833-34 ..	3—4	Edinburgh, Roy. Infirmary	1809-18 ..	6—7
" " "	1834-35 ..	2—3	Christiana, State hospital	1829 ..	5—6
" " "	1835-36 ..	4—5	St. Petersburg, St. Mary's hos.	1837 ..	25—26
" " "	1836-37 ..	3—4	" Citizens' do		20—30
" " "	1837-38 ..	3—4	" Military do		5—7
Strasbourg, Clinique of Prof. Forget	1835-38 ..	15—16	" Dr. Seidlitz's Clinique	1839-40 ..	13—14
Montpelier, all the hospitals		10—	" " " preceding years		8—9
Bordeaux, hosp. St. André		10—			Average 9—10
Lyons, Hotel Dieu	1837 ..	13—14	HOMŒOPATHIC INSTITUTIONS.		
" " year not stated		14—15	Leipzig,	1832-33 ..	2—3
Toulouse, year not stated		7—8	"	1839-40 ..	4—5
Marseille, do do		12—13	"	1840-41 ..	4—5
Rennes, do do		12—13	Vienna, hospital of the Sisters of Charity	1834-35 ..	6—7
Geneva hospital,	1823 ..	9—10	" Sisters of Charity	1835-36 ..	8—9
Paris, Hotel Dieu	1822 ..	14—15	" " "	1836-38 ..	6—7
" " "	1835 ..	9—10	" " "	1838-39 ..	5—6
" Pitié	1822 ..	12—13	" " "	1839-40 ..	4—5
" Charité	1822 ..	18—19	" " "	1840-41 ..	6—7
" St. Antoine	1822 ..	14—15			
" Necker	1822 ..	18—			

		Died in 100
Munich	1836-37 . .	2—3
Brieg, in Silesia, institution for sick female servants	1837 . .	1—3
Hungary, hospital in Gyon- gyos	1840-41 . .	4—5
“ “ in Guns	1833-39 . .	4—5
“ “ “	1840 . .	4—5
Average		4—5

AVERAGE NUMBER OF DAYS OF TREATMENT
IN THE RESPECTIVE HOSPITALS.

ALLOPATHIC INSTITUTIONS.

Charité, in Berlin	34—35
Polyclinique, in Gottingen	33—34
St. Catharine's, Stuttgart*)	1828-29 . . 23—24
“ “ “	1829-30 . . 24—25
“ “ “	1830-31 . . 23—24
“ “ “	1831-32 . . 23—24
“ “ “	1832-33 . . 22—23
“ “ “	1833-34 . . 24—25
“ “ “	1834-35 . . 21—22
“ “ “	1835-36 . . 21—21
“ “ “	1836-37 . . 18—19
“ “ “	1837-38 . . 19—20
Paris, Hotel Dieu	1822 . . 25—26
“ Pitié	28—29
“ Charité	30—31
“ St. Antoine	31—32
“ Necker	33—34
“ Cochin	25—26
“ Beaujon	30—31
“ St. Louis	60—61
“ Venereal hospital	66—67
“ Maison Royale	24—25
	<hr/> Average 28—29

* Every one conversant with the subject, will be aware that I desire to be as impartial as possible in summing up these results. If, for instance, instead of the *annual* results of the treatment in St. Catharine's hospital, I had assumed the *decennial* as the standard, the results would have been still more unfavorable to Allopathy.

HOMŒOPATHIC INSTITUTIONS.

Leipzig,	1839-40 . .	17—18
“	1840-41 . .	37—38
Vienna, Sisters of Charity	1834-35 . .	19—20
“ “ “	1835-36 . .	23—24
“ “ “	1836-38 . .	15—16
“ “ “	1839-40 . .	21—22
“ “ “	1840-41 . .	21—22
Munich	1836-37 . .	10—11
Average		20—21

RESPECTIVE EXPENSES OF ALLOPATHIC AND
HOMŒOPATHIC TREATMENT.

The average expenses for the treatment of each individual patient were :—

1. In St. Catharine's hospital, Huttgart, per diem, for medicines $5\frac{1}{2}$ kr. rheim, about 4 cts. U. S. currency. Board, etc. etc., 29 kr, about 20 cents, our currency.

2. In the Homœopathic hospital of Leipzig, 1840, per diem, for all expenses, 4 Sgr. 5, 93 Pf. about 11 cts. In 1841 4 Sgr. about 10 cts.

In the Homœopathic hospital of the Sisters of Charity, in Vienna, were treated in 1840-41 910 patients, and polyclinically 4367. The total expense for medicines, which have to be newly prepared every year was 200 fl. Conv. M, about 107 dollars. The expense of the medicines for each patient, therefore, was but 7, 8 Pf., or 1 cent and a half.

Such are the simple, unadorned facts, and they most satisfactorily prove that, of 100 patients 9—10 died under Allopathic treatment, 4—5 under Homœopathic treatment. The average duration of treatment was 28—29 days under Allopathic treatment, 20—21 days under Homœopathic treatment; and that, under Allopathic treatment the average expense was for each patient nearly $2\frac{1}{2}$ times as much per diem, as under Homœopathic treatment for the whole course of the disease. I leave it to every individual to draw his conclusions from these facts; to me they seem beyond contradiction to prove.

1. That, supposing Homœopathy to do *nothing*, Allopathia, in spite of its doing so *much*, frequently is only injurious.

2. That, supposing Homœopathy to do *something*, it is fully able to compete with its adversary.

Therefore we ask once more : what are the conclusions ? We ask from every individual an answer, and from every government, *action*.

Dr. Kurtz, in a note to these tables, makes the following remarks with regard to these results :

“ That the conclusions drawn from the totality of facts approach the truth very closely, will be most strikingly evident if we compare the results of the treatment of each school, of the same year and in the same place with each other. By doing so we will perceive that,

In 1838, in the General hospital of Vienna died 13—14 per centum.

In the same year, at the Sisters of Charity, at the same place 5—6 per cent.

In Leipzig, in 1839, in St. Jacob's hospital, died 11—12 per cent.

In the Homœopathic hospital of the same place, in the same year 4—5 per cent.

POISONING OF FIVE CHILDREN BY COPPER.

BY DR. BEER,

OF THE MEDICAL POLICE OF VIENNA.

“ On the first of April of this year, at eight o'clock in the evening, I received a notice from a surgeon that, in a certain house, several children had been attacked with violent vomiting without any known cause. A narrower examination afforded me the following particulars. At twelve o'clock noon of the

first of April, Anna K——n gave to three children, viz.—Frany Krakowetz, aged three years, Elizabeth Fetty, eleven years, and Frany Eigenmann, four years, some confectionary, of which the children ate a portion on the spot, and, carrying a portion home, gave some of it to Mary Stacker, aged eleven, and Anna Schedel, aged six years.

“ The following symptoms appeared in the three children who had eaten at dinner of the confectionary immediately after eating, and in the two who had eaten later some hours after the indulgence :—

“ Unquenchable thirst, headache, and giddiness, nausea, dryness of the mouth, frequent vomiting of a fluid, partly yellow brown, partly blackish green, severe tormina at the region of the navel, suppression of urine, slight tension of the abdomen, which was tender on pressure, obstinate costiveness with constant tenesmus, pain in the small of the back, with cold extremities, and cold sweat. After the vomiting had somewhat subsided, nervous symptoms were superadded, of which the chief were—very severe headache, slight delirium, tearing pain in the upper extremities, and convulsive movements of the lower, particularly in the calves of the leg, great exhaustion and somnolence, which, in the case of three children, amounted to a comatose condition ; the countenance was in parts red, in parts very pale. The pulse in four of the children was very small, contracted, and slow ; only in the case of Frany Krakowetz, a plethoric boy, did I find a hard, full, quick pulse, with redness of the face and dryness of the skin. M. Stacker had six attacks of diarrhœa, and Anna Schedel one attack of vomiting of blood and mucus.”

It is not necessary to mention the chemical process by which copper, which must have existed in large quantity in the confectionary, was detected.

The children seem all to have recovered,

but one of them, three weeks after this event, was attacked by jaundice, and another of them by a tertian intermittent fever, attended with periodic diarrhœa.—(*Osterreichische Medicinische Wochenschrift*; No. 35. Vienna, 27th August, 1842.)—*British Journal of Homœopathy*.

ON THE

TRANSMUTATION OF METALS IN THE HUMAN BODY.

BY DR. OSIUS, JUN.,

OF HANAU.

For nearly three years Dr. Osius had the treatment of a girl 17 years of age, of a decidedly scrofulous habit of body, who, after suffering from first insufficiency, then total suppression, of the menses, became affected with confirmed epilepsy. The attacks always appeared about the time of the menstruation, and for some days subsequent to the attack, besides other phenomena, the urine always presented the most remarkable changes. It was passed in great abundance, soon deposited a rose-red sediment; it then became quite clear and watery, and contained a great number of small, red, gritty globules, like red floor-sand. These appearances of the urine sometimes preceded the attacks, and indicated with great exactitude their occurrence. Among other remedies, chiefly vegetable, a great quantity of oxide of zinc was given; between the 5th July and 30th of October, the patient took 1459 grs. of zinc. About the 7th of September, when the highest dose of zinc was given, amounting to 36 grs. daily, the urine presented peculiarities which it never

had done before: it was thick, opaque, opalescent, turbid, flowed like olive oil, but presented neither a sediment nor any gritty globules. These changes in the urine, which was passed not more frequently than before, and without any complaint, lasted about six days, and appeared every time it was passed. A chemical examination of the urine was made by Beyer, apothecary and medical assessor of the place. From the obstinate constipation of the patient, he was led to expect that the zinc might be found in some of the excretions, and to ascertain the correctness of his suspicion, made the following examination of the urine:—

The urine was first concentrated by evaporation, then digested with nitric acid, and after the acid had been neutralized by ammonia, the liquid was tested in the usual way for zinc. Not one of the reagents employed, however, threw down a precipitate of that metal. The solution of ferrocyanate of potash produced no white gelatinous precipitate, but a reddish-brown one which was not re-dissolved by the addition of hydro-chloric acid. The experimenters were led by this result to try the effect of a polished iron wire. This became covered with a metallic, reddish coating, and a very abundant deposition of this substance took place.

The following experiments were made in the presence of Osius. In one vessel was put urine to all appearance healthy; in a second, urine decomposed by a solution of sulphate of copper; and in a third, water with the same quantity of solution of sulphate of copper as in the second. No. 1 did not, on the addition even of a large quantity of ferrocyanate of potash, throw down the slightest precipitate. No. 2 had already, from the sulphate of copper, a greenish sediment. On the addition of ferrocyanate of potash, a precipitate, exactly resembling in colour and general aspect the one described above, ap-

peared. In No. 3, the precipitate was clearer and less abundant than in No. 2, but corresponded perfectly in other respects. In No. 2 and No. 3 the precipitate was as little soluble in hydrochloric acid as that of the urine of the epileptic patient; an iron wire dipped in Nos. 2 and 3 became covered with a reddish coating. The urine of the patient was examined in the further progress of the cure along with that of her mother; at this time 24 grains of zinc were taken within the 24 hours. The urine of both contained of metallic products only traces of iron, neither copper nor zinc. The same result was obtained on another occasion, on which 12 grs. of zinc were taken in 24 hours. The patient remained perfectly well until the spring of 1840, when the epileptic attacks returned and were cured by the ammoniacet of copper.

The successive experiments with ferrocyanate of potash and polished iron proved, beyond a doubt, that the urine of the patient contained the greatest quantity of copper at the time when she took the greatest quantity of zinc. The quantity of copper was very considerable: there were about 10 grs. of copper in 16 oz. of urine. Osius most satisfactorily showed that the copper was neither taken with the food, nor by any means mixed with the urine after it was passed,—that it is not usually found in urine at all, and never in such a quantity; and thus attempted to establish that it must have resulted from changes effected by the animal organism.

Dr. Osius then constructs a most ingenious argument, derived partly from analogical changes which we know to occur in the vegetable world, partly from the observations of Pfaff, Paulson, and Prout, on the changes that take place in the egg during incubation, in support of the idea that animal organism is able to analyze and reunite, in other forms, bodies which, from their defying the chemistry of the laboratory, have been considered ele-

mentary. And he supposes that, in this instance, after the body had been saturated, as it were, with zinc, a sudden secretion of copper from that zinc was brought about by a morbid action of the economy. He enters into the whole question of the probability of the metals not being true elements, and the possibility of their mutual transmutation. We regret exceedingly that our limits prevent us doing justice to his paper: the facts stated, however, and the suggestions made, cannot fail to be interesting, as a side-light thrown by pathology on chemistry, to all who are eagerly watching the evolution of the latter science.—(*Medicinische Annalen*, Herausgegeben von den Mitgliedern der grossherzoglich—badischen Sanitäts-commission in Carlsruhe, &c. 8 Bd., 2 Heft. 1842. Abridged by Dr. Aitenbergen in *Oesterreichische Medicinische Wochenschrift*, Vienna. Nos. 35, 36; August 27, and September 3, 1842.)—*British Journal of Homœopathy*.

MEDICINAL USE OF SAFFRON.

In several cases of obstinate chlorosis that had not yielded to preparations of iron, in one case of puerperal fever in which digitalis and bleeding had failed, and in two cases of chronic artero-phlebitis, Dr. Morgante, of Verona, reports that he has employed saffron with the greatest success, commencing with doses, in the form of pills, amounting to sixteen grains in the twenty-four hours, increasing the dose until the quantity is doubled. As to the manner in which this medicine acts, it is reported to be particularly effective in cases of increased action of the capillary vessels, and analogous in its effect to the more active preparations of iron.—*Memoriale dell. Med. Contemporanea*.

 REVIEW.

“SYNOPTICAL INDEX TO VOLUME II. OF JAHR'S NEW MANUAL OF HOMŒOPATHIC PRACTICE. BY RICHARD BOLLES, M. D. NEW YORK: W. RADDE.”

We have elsewhere earnestly recommended this comprehensive arrangement of Homœopathic facts to the possessors of the Manual, and we now reiterate the suggestion. At a very trifling cost, the practitioner can have at all times before him, a bird's eye view of the great pathogenetic and curative outline of his art. We know of nothing similar except Boenninghausen's "Alphabetical Table," in German, which, of course, is out of the reach of the great majority of Homœopaths, in this country at least.

There is, doubtless, an apology due for the late appearance of this Appendix, intended, as it is, to correct the errors in, and furnish an index to, the Second Volume of the Manual. We were engaged in comparing and revising the English edition, as well as correcting its numerous errors, when the approaches of an overwhelming disease stayed our tedious and ungrateful task. The publisher detained the work in the press some three months, waiting our recovery, but finally felt compelled to send it forth without our aid, and, indeed, without our consent. There still being no probability that we should be able to resume our labours for some months, the assistance of Dr. Bolles was obtained, who, actuated by a true zeal for the promotion of the new method, compiled a full and practical index to all the important matters in the volume, carefully compared the text with the original French, for the correction of the remaining errors, (some of which are of much importance, one or two very gross indeed,) and introduced a mode of reference, by which the

practitioner can determine at a glance whether an error exists in any given article or paragraph.

From the foregoing it will be perceived that the appendix is of importance to the physician, nay, indispensable to him, irrespective of the table of errata. In expressing our obligations to the author of the appendix, we may also take this occasion to tender our thanks to the profession at large, who have treated our apparent negligence with so much forbearance.

“AN EPITOME OF HOMŒOPATHIC PRACTICE; COMPILED CHIEFLY FROM JAHR, RUCKERT, BEAUVAIS, BOENNINGHAUSEN, &C. BY J. T. CURTIS, M. D., AND J. LILLIE, M. D. NEW YORK: W. RADDE.”

It is our unpleasant duty to notice this addition to our American Homœopathic books, and to say that it is a complete failure. It fails most sadly in its English, and in the execution of its respectable plan in all other respects. No practitioner can put it to the least use in the world. Its authors have evidently been ambitious: they doubtless intended to produce a practical guide, which should supplant Jahr's Manual; but they must "mend their instance" before they can banish a single copy of this object of their antipathy, even in its obnoxious London dress, from the hands of the profession. In their preface, which, by the way, has little or nothing to do with their book, they echo our animadversions on the stupid errors of the English edition of Jahr's New Manual. This is unnecessary, and out of place: unnecessary, because there are not ten copies of that work in the United States, and never will be; and out of place, because their Epitome could have no use or application in common with Jahr's Manual. This preface opens with charging Jahr with perverting Hahnemann's records very extensively, in reference to the meaning of the German word "*Kreuz*," (small of the

back.) As this is the only part of the entire work which really demands a special notice, we quote all our learned authors say in support of their accusation against Jahr, intending to devote a few lines to the easy task of vindicating his reading of that word "by way of conclusion," as the tough-sided clergy of thirty years since were wont to say.

"We have been compelled to differ from the New Manual and the English translation in the rendering of some very important German expressions. We make these alterations, not for the purpose of finding fault, but because in an art so exact as Homœopathy, exactness of phraseology is absolutely indispensable. Thus, *Kreuzschmerzen* is always translated in Jahr's book, by *maux aux reins*, which he says has exactly the same meaning in French, that *Kreuzschmerzen* has in popular language in Germany.

"This is strange inadvertence. Jahr does not say that *Kreuz* means loins or small of the back. He must be aware that it means the bone between the hip bones known to anatomists as the sacrum. *Kreuzschmerzen*, therefore, must mean sacral pains, or in plain English pains of the rump. But he asserts (and he ought to know) that custom in Germany has changed the meaning to *loin pains*. Now though he were right in this, it would be no justification of his translation. For Hahnemann does not use the phrase in this sense; and it must never be forgotten that Hahnemann's records form the mass of our *Materia Medica*. In his elaborate record of *Pulsatilla*, we find him formally explaining *Kreuz* by *heilige Bein*, holy bone, or sacrum; and anatomists use *Kreuz* in the very same sense. By what authority then does Jahr in the synopsis of Hahnemann's *Pulsatilla*, change sacral pains into loin pains? Hahnemann distinguishes loin pains in that very connection by the word *Lendenschmerzen*; why does Jahr confound both under one phrase?

"It were well if this were the only important

medicine thus perverted. But when we remember that there is not one weighty and well-defined drug, from *Aconite* to *Zinc*, in which *Kreuzschmerzen* (sacral pains) does not form a leading feature, and that it is a symptom of perpetual occurrence in practice, especially in the treatment of female complaints, the vast importance of the change will be duly appreciated."

The sentence referred to by these well-assured critics runs thus: "*Im Kreuze (heiligen Beine) ein druckender Schmerz, wie von Ermüdung, Abends.*" [Aching in the small of the back (sacral portion) as after fatigue, evenings].

There is no doubt that this simple sentence, taken out of its connection with the *Materia Medica* of Hahnemann, might with great propriety be so read as to confirm the erroneous view derived from it by Doctors Curtis and Lillie; but the "*Heiligebein*" included in brackets does not define the meaning of the word "*Kreuz*" "formally," i. e. tell us how it is to be understood throughout the *Materia Medica*; far from it. It merely informs us that in that single instance the *pulsatilla* backache was located by the trier of it, on a cross-examination after having made use of the word *Kreuz*, in the sacrum. Hahnemann religiously recorded the terms made use of by the triers of the drugs in all cases as a rule, and included his addition to their testimony in brackets, and thus, as in this case, the words standing in his brackets frequently show that exceptions or additions ought to be made to such terms; "*Kreuz*," as otherwise applied in the *materia medica*, required in this case to be restricted, its usual force being too broad.

To sustain our assertions, it will be sufficient to quote a single sentence from Hahnemann's record of *Sepia*; "*Schmerz wie verrenkt über den Hüften, im Kreuze Nachmittags und Abends im Bette.*" [Pain as if from a sprain in the small of the back, (*Kreuze*),

above the hips, etc.*] It is absolute torture of criticism (hypercriticism is too mild a phrase for such folly) to say, that Hahnemann "formally explains" the signification of this word (*Kreuz*) for his whole records, by *Heiligebein*, and upon this assumption to charge Jahr with "fully perverting" any part of those records in his Manual. Hahnemann would certainly have made this formal explanation in a preface to the entire work if he had intended to change the universal acceptance of this word; he certainly could not have left so great a deviation unnoticed till the word had occurred a hundred times, without any intimation of its new force whatsoever. Nor could Jahr, the personal friend, pupil and daily associate of Hahnemann, have remained so many years ignorant of so important a change in the meaning of a word of such constant recurrence. The change is preposterous in the extreme, and we do right to add that, as it has given occasion of offence against our whole school, it is as censurable in another respect as it is falsely grounded in word-knowledge.

It is not to be denied that there is some difficulty in defining the boundary of the region called *Kreuz* in our materia medica, and in common German parlance, just as there would be in rendering the English nearly synonymous expression, "small of the back," into French or German, were there Hahnemannian pathogenetics (which to our shame

there are not) to be so rendered. The terms in both languages cover indefinite regions of the back: above, the region loses itself indefinitely in the loins, and below, in the sacrum, and it appears to us to have no very accurate lateral boundaries; besides, it must be borne in mind that different persons, or even the same person at different times, and especially with different characters of pain, may apply the terms *Kreuz* and *Lenden*, or small of the back and loins, indiscriminately, for the same localities.

Our authors are in error, too, when they say that German anatomists restrict the word *Kreuz* to the sacrum. We happen to have no other German Anatomy than Meyer's who, by the way, was the standard bearer in Hahnemann's palmy days, and he expressly defines the word as naming a region of which the two lower lumbar vertebræ and the sacrum are the bony basis. They have evidently confounded two very distinct words in their learned researches among the German anatomists, to wit: *Kreuz* and *Kreuzbein*. These words are no more synonymous than are *Wangenbein* and *Wange*, or *Darmbein* and *Darm* in German, or cheek-bone and cheek, or thigh-bone and thigh in English; although it is a mistake that hasty or immature German reading might betray any one into.

"By way of improvement," as our old style clerici say, we take this opportunity to state that Dr. Neidhard, of Philadelphia, has promised us a paper on Renal Pathogenetics, in which we fervently hope to find the first part of the clue by which our school is to escape from the labyrinth in which it is involved respecting very many of the dorsal sufferings, not so much, perhaps, on account of the necessary ambiguities used in common parlance to express them, as on account of the paucity of exact pathogenetic observations, in this great department of maladies.

* The appeal to the fears of females (respecting their uterine sufferings) in the last lines of our extract, is so bald an application of the argumentum ad ignorantiam as to justify our citing two more passages from the accredited sources of the Epitome, which it is impossible to make sense of in rendering "*Kreuz*," by sacrum, or by the plain English word, "rump."—viz.: "*Schmerz über dem heiligen Beine im Kreuz*."—[Pain above the sacrum in the small of the back.]—"Schmerz im Kreuze und heiligen Beine."—[Pain in the small of the back and sacrum.]

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BY
A. GERALD HULL, M. D.

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T H E

HOMŒOPATHIC EXAMINER.

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VOL. 3.

THE DEATH OF HAHNEMANN.

This impressive event took place on the second of July, after a protracted bronchial catarrh.

The disease began on the 12th of April, two days after he had celebrated his 87th birth-day in excellent health and spirits. Hahnemann had for twenty years suffered from attacks of this disease in the spring of the year. He had ever, as in this instance, prescribed for himself. This last attack set in with a serious diarrhœa, which exhausted him very much. In the early stages of the sickness he announced to his friends the opinion that he could not survive it. "The earthly frame is worn out," was his expression. He seems to have suffered but slightly till a short time (probably a few days only) before his decease, when a dyspnœa came on in paroxysms, increasing in severity till the final one, which lasted thirteen hours, and terminated in suffocation! His mental powers remained perfectly unimpaired to the last moment. In reply to a remark made by his afflicted wife during one of his terrible paroxysms of distressed respiration, in effect "that Providence ought to spare him who had in his laborious career suffered so much already, and who had

relieved the sufferings of so many of his fellow-beings," he uttered the following characteristic sentiments: "Me? wherefore me? Every one in this world works according to the gifts and capabilities which he receives from Heaven, and may receive more or less preference before the judgment seat of Man, but none before that of Providence. Providence is indebted to me for nothing, but to Him I am indebted for much, yea, for every thing." These delightful words of truth are the precious ensigns of a faithful piety, which had adorned his whole career, and which he was not ashamed to exhibit and enforce when most of the learned world had joined the popular ranks of a scepticism which could hear of no God, but a cold, blind, soulless Destiny. They were, doubtless, his last on earth.

We gather these meagre details from a letter of Jahr's, contained in the *Allgem. Hom. Zeitung*, No. 17, vol. 24, and a letter from Croserio to the Editor of this Journal. Croserio thus expresses himself:

"How much equanimity, patience and imperturbable goodness he exhibited! Though he had a distinct presentiment of his approaching end, yet he never permitted an expression to escape him which could alarm his wife; he calmly made his final arrangements, and embraced each of his friends with tenderness, such as belonged to a final adieu, but with steady equanimity."

"Hahnemann expired at 5 A. M. Two hours afterwards I visited his sacred remains.

The face expressed an ineffable calm. Death could not detract the least from the angelic goodness which belonged to the expression of his features."

Jahr writes with some bitterness towards those who enjoyed the social confidence of the venerable patient, implying that they had managed to keep his best friends away from the sick chamber; but he expresses himself with eloquent fervour respecting the departure of his venerable master and friend.

"With your letter to him in my pocket, I went instantly, obeying Mad. Hahnemann's request, to visit her that day, and was admitted directly to his chamber. There, however, (imagine the moment!) instead of the dear and friendly greeting of the venerable gray-headed master, I beheld the afflicted wife stretched upon his bed dissolved in tears, and beside her the lifeless cold remains of him, who, 5 hours before, had departed to that life where there is no more strife, nor disease, nor death!"

* * * * * "The mourning among his disciples of every shade of opinion, irrespective of their previous petty differences, is alike deep and sincere. All shed tears of deep gratitude and affection for his memory. What those however, have lost who had the happiness to possess his personal friendship, those only can estimate who have known this great man in his private and domestic relations, and especially during the latter years of his life. By himself, undisturbed by exciting intrigues, he was of childlike, earnest benevolence; and he was never so happy as when in the society of his friends, where no circumspection was necessary, he could freely expose a soul in which there was no shadow of guile or falsehood! Well, he has chivalrously fought his troubled and many times thorn-crowned career of life, and terminated it with distinguished honors. *Sit ei terra levis!*"

The widow of Hahnemann applied for and received permission to retain the remains of

her husband for at least twenty days beyond the usual time of interment. The body was embalmed, and up to our last advices was not yet interred.

Proceedings had been commenced for the erection in Paris, probably in Père la Chaise, of a suitable monument, to commemorate, not so much, perhaps, the services of the illustrious deceased, as to set up an enduring record of the novel fact in the history of man, that for once a reformer was properly and fairly honored by his contemporaries. The Committee appointed to receive subscriptions for this commendable object comprises some of the worthiest and brightest names of France. Of these we are able to decipher from Croserio's letter the names of Las Casas, Gasparin, (Minister of State) David D'Ange, Berenger, Montesquieu, Croserio, Jahr, and Leon Simon.

A FEW OBSERVATIONS

ON THE

GREAT AND SMALL IN NATURE,

BY

CHRISTIAN DOPPLER,

Professor of Mathematics at the Royal Bohemian Institute of Prague.

Translated from the German by John Schue, M.D.

That the ideas "great" and "small" are relative, and that it depends solely upon the proper choice and the absolute quantity of its fundamental unit, whether a thing is to be called great or small, are truths which in our days we hear from the lips of nearly every one.

It appears, nevertheless, that in their practical application, and even in science, we are

less strict in the choice of units of measure, than might be expected under the circumstances. How else is it to be understood that without giving our reasons, we not unfrequently pronounce things extraordinarily small, small even to disappearance, which, nevertheless, according to a different, and, I think, quite reasonable view, might be called great, nay, perhaps, even *wonderfully great*.

But, while using words so bold in the presence of science, it behooves me, on my part, to defend them, and the shortest way to do this will be, I think, to prove the above assertion in some concrete case.

The fact, however, that the point under consideration is, by accident, closely allied to a question which, in our own times, has provoked not only much discussion, but even ridicule, induces me to declare at the beginning most unequivocally, that I write neither in the interest nor favor of anybody's views, and that I do not wish to have the following remarks thought to be made in reference to any doctrine.

The gentlemen who requested me to publish these remarks are, on the contrary, faithful adherents of the old system of medicine, and they did so from a conviction that it would be important to see my arguments either refuted, or if true, confirmed.

It is indeed not to be denied, that in the appreciation of quantity for a large number of effects, weight offers not only a very proper, but also very ready scale, as is more especially the case in all effects of masses. But we would evidently go too far, if we were to conclude from this, that units of weight were a scale to measure *all* effects of bodies by. The effects of electricity of touch, for instance, are to be determined by entirely different units of weight, not to mention many other phenomena in nature.

Before, therefore, we permit ourselves to set down anything as "great" or "small," or on

account of its apparent insignificance, to place it among the chimeras, it is our duty before all to prove and justify the unit which we have adopted as the base for measure, so that we may decide whether in its examination we have to apply the scales or the inch measure.

Keeping before our minds this caution, and returning to our former reproach, we may well ask the question: With what right do we estimate the effects of drugs according to their weight, and not much rather according to the extent of their effective surface? or in other words, is it the interior of the drug or is it those external parts which are in contact with the rest of the sensible world which determine its efficacy as a drug? If the latter be indeed true, or only imaginable, what then would become of the so-called smallness of some doses of medicines, which sometimes appear even to evaporate into nothing? As it is not my intention at present to answer either of the questions, I may at this time content myself with the general admission, that possibly and perhaps bodies act medicinally only in as much as relates to their surfaces, or in as far as they can be changed into surfaces themselves.

Under the physical surface of a body, in contrast to the mathematical, we understand the collection of all those atoms, which in one direction at least are surrounded by atoms of a different kind. Hence it follows immediately, that bodies which are broken, or divided in any other manner, must necessarily gain in surface, since the atoms, which were before included in the interior of the body, come now in contact with the surrounding medium, and therefore form part of the new surface.

If it is, on the other side, equally evident that two or more bodies of the same kind, which before formed one whole, or which otherwise were closely fitted to each other, be joined to each other, they will lose their respective surfaces, at those places of contact at least, where

we cannot suppose any intervening medium. A more close consideration of the same subject leads to the result, that the totality of surface *increases* at least in the same, and not unfrequently in a greater proportion, as the diameters of the individual atoms *decrease*.

If, therefore, for instance, a cubic inch of any body be pounded into coarse sand, by which process it becomes divided into more than a million of particles, its surface, as is proved by a simple calculation, will already be divided to six or seven square feet.

Microscopic investigations furthermore demonstrate, that the yet perceptible particles of lime which has deliquesced in the atmosphere, of flour, mould, besides many other bodies in the form of powder, as nature or art offer them, are exceeded in size several hundred fold by a grain of sand, of the description mentioned above.

If, therefore, we triturate the above mentioned body to the fineness of flour, mould, etc., the totality of surface will offer an area of several thousand square feet. We would greatly err, however, if we were to suppose, that this surface is in reality (even in its greater part only) a physical, and therefore an efficient one. We are, on the contrary, according to the above, compelled to assume that the really efficient surface, after this general and close contact of the exceedingly fine particles of dust, is increased, perhaps, to only a very limited extent.

To cause, however, the totality of surface to become in truth a physical or effective one, we must at the beginning endeavor to prevent the individual particles from coming into contact with each other, which in my opinion cannot be done more completely than by intermingling at the beginning, the particles of the body in question with some foreign substance, and then triturating both together. This extension and development of surface as will be readily seen, can proceed with safety and good

success only, if the substance serving as a medium be present in sufficient quantity.

The latter obtains in a much higher degree of course in the instance of fluid bodies, since their atoms are not, like those of solid bodies, of the polyhedric, but, as their great mobility of itself is sufficient to prove, of the round (*or oblong*) form. The author on this occasion takes the liberty to risk the perhaps not visionary conjecture, that the trituration or subdivision of the body alone, not in contact with a medium of trituration can only be carried to a certain extent, in as much as very finely triturated bodies appear to assume to some degree, and gradually, the property of mobility, which is proper only to fluids.

From the moment they obtain this property, a further subdivision of the atoms is of course out of the question, since the entire power applied, exactly as in the instance of fluids, instead of destroying the atoms, serves only to separate them from each other, and to change their locality. The very great diffusibility of fine and dry powders; as well as the so-called liquidity of quicksand, etc., may be considered as proving satisfactorily the great decrease in friction among the particles, and therefore for the proportionally greater mobility of them. But an entirely different result will be the consequence, if to this fine powder under process of trituration, be added another body capable of still further diminution.

By subjecting the latter to comminution, the molecules of the original body, which are between its atoms, will necessarily be diminished in size at the same time. After this digression we turn again to the principal point under consideration.

From what has been said so far, it may already be perceived that we are but little justified in believing, that the easy solubility of many substances by the gastric juice, makes not only their further diminution unnecessary, but even does every thing necessary towards

the development of their medical properties. If, as has at present been merely supposed possible, for the sake of argument, we have to estimate the efficiency of a body according to its surface, it will be evident that the space offered by the stomach and intestines will be much too small to receive the requisite vehicle for even the smallest dose of medicine. It is, therefore, not the diminution of bodies as such, but rather their increase of surface resulting from it, which is of importance to us. Unmixed fluids consequently have their surfaces shared by the form of the vessel, those of mixed are, on the contrary, increased in proportion to the quantity of the substance added as a medium, in exactly the same manner as demonstrated in the instance of solid triturated bodies.

A further consideration of this subject, and the division of a body undertaken with a view of expanding its surface, leads to the following interesting results. If we triturate the one hundredth part of the above-mentioned powder with ninety-nine equal parts of any other medium, it will by no means be extravagant to suppose that every particle of the powder in question, after being triturated for hours with some heterogeneous body, capable of still further diminution, will be dissolved in the atoms, each of them many hundred times smaller in diameter. If, for the sake of a more easy calculation, we for the present assume a hundred as the number, and if we treat the remaining ninety-nine in an equal manner, the surface, after this first trituration, will already be increased from 1000 square feet, to more than 1000 square yards.

If, then, we repeat this process several times in succession, we arrive at the higher triturations, and calculation will demonstrate that the physical surface, after the third trituration, has reached two square miles; that in the fifth it is equal to the surface of the whole Austrian Empire, and in the sixth surpasses even the

territorial extent of Asia and Africa. Nay, this extension of surface proceeds at such a rapid rate, that at the ninth trituration it exceeds more than twenty times the whole surface of the sun, all the planets and their satellites. But we have by the same process and at the same time divided the body, the size of which at first was only nine cubic inches, into more than a quintillion of individual atoms.*

To express, finally, the number of square miles, representing the extent of surface of the thirtieth dilution, it would require a number of not less than *fifty* characters.

This extension of surface, stupendous and incomprehensible as it appears, would have grown at a yet more rapid rate, if, instead of assuming 100 as the number into which the molecules of the body had been divided, we had taken a higher one, which we probably might have done without doing violence to truth. A trituration of this kind, however, would be practically impossible, because we could not find matter sufficient to serve as a medium. For it is demonstrated by calculation, that, to expand the surface of only a cubic inch of any substance, corresponding to the twenty-fifth trituration, the quantity of medium required for such expansion would exceed the cubic contents of our earth more than five times. We shall therefore be obliged to rest satisfied with the trituration of only one hundredth part of the preceding medium, which, by an analogous process of reasoning, will convince us that on the ground of the above assumption, the surface of even this small molecule increases at an astonishing rate. Thus again, calculation proves that, supposing 200 to be the rate of each division, the thirtieth tritura-

* Who could, indeed, doubt the possible smallness of such atoms, since according to Ehrenberg's late discoveries, one cubic inch of a conglomerate of Infusoria, contains more than 41000 millions of those well-organized animalculi?

tion has a surface of about 2000 square miles.

It is, therefore, no exaggerated, but, on the contrary, rather probable assumption, that as much of the thirtieth trituration as may be put upon the point of a penknife, and which contains probably not more than a decillionth part of the original drug, divided into, perhaps, a million of invisible atoms of dust, still possesses a surface of many thousand square yards. If, therefore, it is quantity as such, on which the medicinal properties of a drug depend, then doses of this kind must necessarily be thought ridiculously small; if, on the contrary, we are to estimate the efficiency according to the surface, then a dose apparently infinitely minute, would appear as quite considerable, and frequently, perhaps, astonishingly large.

Under these circumstances, and considering the importance of the subject, it is our duty to inquire with what right do we estimate the efficiency of drugs according to quantity, viz., weight, instead of the extent of their efficient surfaces; and the author must candidly confess that all he has ever heard from the mouths of experienced and reflecting practitioners, of the strange and often unexpected effects of drugs, has tended only to strengthen him in the conviction that it is surface and weight which produces the effects of drugs.

Recollecting, therefore, that the question under consideration, although immediately falling under the jurisdiction of Pharmacodynamics and Physiology, yet allows of a purely philosophical examination; the author, therefore, we trust, will not be thought guilty of overstepping the limits of his own branch of science, if he presume here to offer the reasons which led him to adopt the idea of effects proportionate to the extent of surface, and at the same time develops his views of the manner in which drugs effect the organism.

Four years ago the author demonstrated a pri-

ori (in an essay on the Electricity of Touch*)

* *On the probable cause of the production of Electricity by touch and of Electrical Tension, Vol. XVIII, Annals of the Imperial Polytechnic Institute in Vienna.*

The argument as presented in that essay is briefly the following:

Laplace has already demonstrated, that all fluid bodies by reason of the comparatively strong drafts on their surfaces must necessarily form a thin stratum of varying thickness, an extremely fine cuticle, as it were, which fact he used with great acuteness in explaining the phenomena of capillary vessels. In doing so, however, he fell into the mistake of attributing greater density to the cuticle itself than to the interior of the fluid body, in consequence of assuming the predominance of the power of attraction also in fluids, a supposition which was subsequently found untenable beyond a doubt. The change in the theory of capillary vessels made necessary consequent upon this discovery, was made by *Poisson* in as much as he proved that these conclusions held good only as far as regarded solid, and by no means fluid bodies; since the cuticle on the surface of the latter is decidedly thin in consequence of the predominance in them of the power of repulsion from within to without. It may however, at the first glance, be supposed that the formation of such a cuticle on the surface of a body should be dependent on the great mobility of its smallest atoms and that on that account such a formation could not take place in solid bodies. But all bodies are more or less elastic, can be expanded by heat or contracted by cold, proving thereby conclusively that their smallest particles possess the capability to approach or to separate from each other. But would it not be tantamount to doubting the first principles of Dynamics, if we were to conclude from this that the power of attraction proper to these atoms was insufficient to cause the same effects, which we have an opportunity of seeing produced almost daily by external agencies such as pressing or beating? It can not in truth be doubted in the least, that all solid bodies are possessed of a much denser cuticle, and that the degree of density depends partly upon the nature of the body in question, partly upon that of the surrounding medium, but that it is necessarily changed by the changes occurring in the latter. As yet however we know not of a single body which is not more or less electrical. Experience proves

that bodies become electrical, not only by touching each other, but even by merely being diminished, and has therefrom, as he flat-
ters himself, proved several phenomena in a very simple and satisfactory manner.

Assuming this as a fact, it can not be doubted that the surface increasing at such a rapid rate, the quantity of free electricity must increase at the same rate, in which case it not unfrequently happens that under particularly favorable circumstances, such as the trituration of crystalized sugar, the electricity accumulated on the surface, exhibits phenomena of light. We may nevertheless consider it certain that electricity which during the progress of trituration is developed in immense quantities, possesses such a small degree of tension, that perhaps only a vacuum or the substance of the nerves, which as is well known, are the best conductors, but not metals or other bodies, have any conducting power with regard to the sugar.

even in a thousand instances that whenever a change takes place in the aggregate state, or in the surrounding matter, bodies either emit part of that fluid or strive to appropriate it to themselves. It is therefore but a natural conclusion to suppose that the cuticle contains a quantity of the fluid differing from that of the body itself and that the quantity will vary, and consequently electricity will either be emitted or absorbed in proportion as the density of the cuticle will be changed. If therefore the medium contiguous to a body become changed for instance, by coming into contact with an other heterogeneous body (a), or by a diminution of the latter (b), Electricity will always be evolved, and if circumstances be otherwise favourable, also visible.

This is the view which we made the basis of our argument in the above mentioned essay, and by it we endeavoured to explain the phenomena of the electricity of touch, those of the Galvanic Battery, and to connect with them several other facts and phenomena apparently quite isolated.

(a) Cause of the electricity of touch.

(b) Cause of the phenomenon of the Platina sponge.

We may furthermore remark *en passant*, that in case the two bodies trituated with each other should possess a high degree of chemical affinity for each other, and the surface of contact should continue to enlarge, a chemical connection may even be formed, and it is by no means improbable that the explosions which so frequently happen during the process of trituration, are less owing to a production of heat, than to a chemical affinity, made active by the excessive increase of surfaces. Now, the degree of electrical tension depends solely upon the individual nature of the trituated body and the surrounding medium, and by no means upon the absolute size of the trituated atoms; and the process of trituration, however long continued, increases only their quantity, and by no means their tension.

But with a continued diminution another, and till now unknown fact becomes evident, a fact which to me appears to be of the greatest importance.

As the surfaces of these atoms do not decrease in the same ratio with their physical size, the constant decrease will cause the surfaces to increase at a most astonishing rate, compared with the size of the atoms, and at the same time produce a proportional accumulation of Electricity. If, therefore, we approach a good conductor, such as a nerve to an atom not too small, it will deprive the latter of the small share of its superficial electricity, by leaving it in an indifferent or discharged state. If, on the contrary, the diminution have reached a certain degree (which will depend upon the nature of the diminished body, and the medium in which the latter is placed) this extremely small atom will come under the influence of electricity, and will, if a good conductor should offer, be carried away by it. This is, as I consider, a scientific explanation of what is generally called translation (*uberfuhrung*) of matter, and it will readily be understood that the size of the atoms to be trans-

ferred must necessarily depend upon the respective force of the current of electricity.

From the moment in which the substance of the atoms succumbs to the influence of their surfaces, and apparently independent of the law of gravitation, moves with the greatest facility in every direction, and, as it were, becomes alive; from that moment only, in my opinion, drugs acquire the capacity of penetrating the organism, and of exciting there a curative effect. For if drugs prepared in this manner be brought in contact with the invisible extremities of nerves, their hypermicroscopical atoms will enter the organism at the same time with their superficial electricity, and will, if the nerves be in a perfectly natural state, be thrown out of the system without impediment, after having penetrated it in every direction. But if a body in a state of health be accompanied by an activity of the nervous system, perfectly unimpeded and equally free in every direction, we can not, on the other side, but presume that in a state of imperfect health the power of conduction proper to the nervous substance will be materially diminished, partially and in individual organs, either in consequence of a chemical change or for some other reasons. But, to use a rather material, but, nevertheless, by no means unfit comparison, as streams deposit the sand and pebbles they carry along on those spots only where their currents meet with an impediment, and their rapidity seems broken by obstructions, so in a similar manner, in the diseased organism, may the electric currents, however feeble, leave the atoms of drugs at the diseased spots, where they, according to their individual properties, exert either a curative or detrimental influence.

From the above views on the causes of effects in drugs, which we have merely touched on here, it would follow as an immediate conclusion, that coarsely powdered substances, however soluble they may otherwise be, if they lack a sufficient vehicle for the expansion of

their surfaces, are at most but capable of exerting a materially-chemical, but never a purely dynamic influence upon the organism, while on the contrary, substances such as flint, charcoal, etc., which, under ordinary circumstances, prove medicinally perfectly inert, may possibly affect the system very violently, and consequently, if selected properly, may even be found to act beneficially. The different perfumes also, like the so-called miasmata, if these views be adopted, must be considered as organic or inorganic, and in the latter case diseased or exanthematic effluvia, the atoms of which have already lost their control over the surfaces, and which, subject to the influence of electricity on the surface, find in every animal organism a door open to their entrance, and (to continue the figure) an opportunity for forming there a soil for the cultivation of a diseased organic growth. One remarkable circumstance at least seems to favor such a supposition, viz., that the respective state of the atmospheric electricity exerts a decided and undeniable influence over these phenomena, as far as regards their growth and the intensity of their effects.

The author in returning from these mere conjectures to the more positive ground of physico-mathematical manner of observation, must be permitted to introduce to his readers as the results of the above investigations, *three* points from which a natural philosopher may be induced to observe surfaces of bodies, viz.;

1st. As mathematical bodies, viz.; such as are physically inert.

2d. As physical bodies or such as are capable of producing effects: and

3d. Such as for distinction's sake he thought himself obliged to call *living bodies*; since bodies possessing this property seem to be not subject to the law of gravitation, and as long as they are in this state; neither to chemical laws, and

for this very reason manifest an external surface to which according to the common acceptance of the term, we cannot refuse the characteristic of vitality.

It would be to the author a source of gratification to find that the above essay had given rise to a farther consideration of the same subject, and if so, he would deem that fact a sufficient consolation for any blame which might be attached to him in case the reproaches to science made by him should be deemed too harsh.

OBSERVATIONS

ON

ACONITUM NAPELLUS,

COMPILED

BY DR. J. C. PETERS.

While the Homœopathists are rushing to one extreme, and seem bent upon ascertaining how little medicine they dare give, many of the old school physicians, especially the French, are rushing into the other, and seem to regard it as a necessary step towards a cure, to ascertain how large doses they can give without absolutely killing their patients; 40 to 60 gr. doses of Quinine are getting common in Paris, and an 8 to 10 gr. dose of Opium is considered a mere bagatelle in Strasburgh. Hence the records of the old school practice afford abundant details of accidental (?) cases of poisoning, which are of great value to the Homœopathist, and which, if all other reasons were wanting, should alone suffice to render him an industrious student of old school medicine. We have succeeded in collecting the details of

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20 cases of poisoning with Aconite, 4 of which were fatal, and to which the post mortem results are appended. In addition, we have found some experiments upon drugs by Pereira; and have translated the Pathologico-Anatomical effects recorded by Noack and Trinks in their *Handbuch der Homœopathischen Arzneimittellehre*. We have also taken the liberty to add description of the results of some slight experiments on ourself. Finally, we have collected from a number of standard French and works upon the *Materia Medica*, the prevalent opinions in the old school, of the action of Aconite, their hypothetical theoretical attempts at explanation of the causes of these effects, and the rationality of the manner in which cures take place of certain diseases, against which, experience has shown, that Aconite possesses certain specific powers. The publication of these latter, however, we purpose postponing for the next number of the Examiner. We have in an advanced state of preparation similar articles on Belladonna, Conium, Digitalis, Stramonium, Opium, Mercury, Lead, Nux vomica, Iodine, Agaricus, Ambra, Aloes, Alum and Alumina, Agnus castus, Ammoniacum, Ammonium carbonicum, &c., &c., and have accumulated valuable fragmentary details of some of the effects of almost every article in the *Materia Medica*. All these have been collected without our indulging in the idea of publishing, except at some very distant period; having now yielded assent to their publication in their present imperfect form, we beg indulgence for the numerous imperfections of style and arrangement, for we have merely placed our rough notes, taken while studying with pen in hand, into the hands of the printer.

ACONITUM—CASE OF POISONING.

See Med. Chir. Rev. vol. 31, p. 554.

Dr. Pereira and his colleagues of the hospital at Bordeaux, have for years past been

much in the habit of employing the Alcoholic extract of *Aconitum Napellus*, in the dose of from 3 to 10 grains during the 24 hours, in *chronic rheumatism*, neuralgia, certain forms of paralysis, &c. No accident had been known to result in their practice from its use, until some *fresh* extract had been obtained—of this 5 grains had been given to 3 patients.

One of these died at the expiration of 3 hours after taking it.

And the other 2 became alarmingly ill.

In about a quarter of an hour after the dose, they experienced the *usual* effects; viz., *tremors* in the muscles of the thighs, arms,

And a *pricking, starting sensation* in various parts.

But these symptoms did not cease, as they had usually done before, in a *few minutes*—they rather increased in force, so as to approach almost to *convulsive movements*.

A sense of *great irritation along the throat*, followed by *severe vomitings*, now came on.

During the accession of the convulsions, the patients became *quite unconscious*.

When these ceased, the speech was restored, but the sight was still confused, and a *most intolerable scorching headache* supervened.

The surface was covered with a *cold sweat*, and the pulse was *slow and irregular*, but the respiration was *short and hurried*.

On applying the ear over the region of the heart, it seemed that the impulse or stroke of its apex against the parietes of the thorax was often interrupted, while the ventricles still continued to expel their contents—for the pulse at the wrist not unfrequently beat thrice for one beat of the heart.

Dr. Pereira was struck with the marked resemblance of the symptoms, in many respects, with those of Asiatic cholera.

It was evident that the immediate cause of danger was *un défaut d'innervation* in the circulatory and respiratory systems.

Therefore stimulant treatment was required.

POISONING, CASE I.

Medical Chir. Rev., vol. 32, p. 239.

A man, aged 45, had been afflicted with rheumatic pains for upwards of 9 months, when he went into the Hospital at Bordeaux, 19th of December—2 grains extract Aconite morning and evening—increased to 10 grains daily—patient was nearly cured. 12th Jan. took usual dose, 5 grains, of fresh extract.

Within a quarter of an hour experienced as he had been accustomed to do, *tremblings in the muscles of the thighs and arms*.

These, which were somewhat painful, instead of gradually ceasing in the course of a few minutes, became more and more violent and were succeeded by genuine convulsive movements, which lasted for a quarter of an hour or so.

During convulsions the patient lost all consciousness.

As they ceased, he answered questions distinctly, but his vision remained confused.

He complained of a *fixed, burning headache*, which he said felt as if a bar of iron (hot) was passed through his brain, from one temple to another.

Extreme heat in mouth and throat.

Stomach was so irritable that it almost immediately rejected any food or drink that was taken; respiration hurried and uneasy, pulse slow, irregular, and weak, and limbs were of an icy coldness.

On applying the ear over the cardiac region, the movements and sounds of the heart were heard to be confused and disordered.

Regarded the alarming symptoms as owing to the narcotic effect of the poison on the nervous system, or more especially on the nerves of the respiratory and circulatory systems, as he had seen another patient under similar circumstances sink under the gradual and progressive cessation of the breathing and pulse—

gave *Huaco*, which seems to have a special stimulating effect on the heart—with repeated doses of Ammonia—heat to extremities—frictions with Tinct. Cantharides over spine and stomach.

Unpleasant symptoms gradually ceased, and the patient recovered not only from the poisoning, *but was cured of his rheumatic sufferings.*

Three other cases were similarly affected.

One, who had taken 4 grains, died in three hours.

Following is the report of a fatal case.

A middle aged man had been under treatment for some time, with extract Aconite, *for old rheumatic pains, and had received decided benefit.*

One morning, immediately after taking his usual dose, but of *fresh* extract,

Was suddenly seized with a sense of burning in the throat.

Repeated vomitings.

Great anxiety.

Icy coldness of the limbs and body.

Syncope, and a sort of arrest of the circulation.

These symptoms proved fatal in the course of 4 hours.

POST MORTEM.

VEINS of cerebral membranes were highly congested—and the substance of the brain, when divided, exhibited numerous points of *dark* colored blood.

Lungs were also congested with **BLACK** blood, and were much less crepitant under pressure than usual.

Right (VENOUS) cavities of heart were filled with *thick blood*, which had all the appearance of currant jelly.

The stomach was *zebré*, and exhibited on its surface numerous patches of a **BROWN** color, especially towards cardiac extremity.

The liver and spleen were gorged with **BLACK** blood.

Two other patients in the hospital were afflicted in a similar manner, but in a less severe degree, recovered under the use of strong coffee, and application of outward warmth.

Med. Chir. Rev., vol. 34, p. 498.

On the 11th June, *twelve patients* affected with scorbutus and pellagra, were seized with extreme *malaise*, about an hour after swallowed a dose of what was supposed to be Cochlearia.

1. A man about 60—after suffering from dyspnœa.

Vomitings.

And great anxiety—died in the course of a few hours.

Two middle aged women, who were affected with *pellagorous insanity*, became restless.

Then convulsed.

And at length paralytic and died—it was supposed at first that they had an attack of mania.

The remaining 9 patients fortunately recovered.

They were all affected more or less with the following symptoms :

Rapid prostration of physical and mental energy.

Dilatation of pupils.

Distressing headache and vertigo.

Pain and tension of abdomen, accompanied with borborygmi and vomiting of green colored matters.

Great anxiety.

And sense of oppression at the chest.

Coldness of the whole body, but especially of the extremities, and livid color of the nails.

Cramps in the legs.

Small and fluttering, and occasionally imperceptible pulse.

Everything indicated a state of extreme hyposthenia or general prostration.

POST MORTEMS OF THE THREE.

Vessels of the pia mater and arachnoid highly injected (whether with venous or arterial blood ?

A small quantity of serosity was found between the meninges and base of brain.

Lungs were gorged with blood.

Heart was flabby, and contained a small quantity of dark, fluid blood.

The mucous surface of the stomach and small intestines exhibited patches of vascular injection.

Texture of spleen was extremely soft.

It was found that the juice of the Cochlearia had been inadvertently put into a vessel which contained some fresh juice of Aconite.

This fact, says the reporter, while it is on the one hand deplorable from the loss of life which took place, is, on the other, very instructive—for it most distinctly confirms the accuracy of Giacomini's opinion, that Aconite is to be regarded as a direct sedative or hyposthenic drug, and that its proper antidotes are stimulants, such as spirituous liquors, *opiates* (?) Cinnamon, &c.

Some modern toxicologists have committed a serious error in regarding Aconite as an Acrid-Narcotic, which requires antiphlogistic remedies to counteract its stimulating effects.

We observe no genuine traces of inflammation in the bodies of those who have fallen victims to this poison—the mere circumstance of patches here and there of vascular fullness along the alimentary canal, proves nothing—for this appearance is observed in almost all cases where life is extinguished from the operation of sedative agents.

The flaccid state of the heart, the softened lacerable condition of the spleen, the emptiness of the large blood vessels, and the passive stasis of the blood in the substance of the lungs, all tend to prove that death was the

result of a general prostration of the vital powers.

CASE OF POISONING.

Pereira Mat. Med., vol. 2, page 742.

In December, 1836, Mr. Prescott, aged 58, took 3 roots of *Aconitum Napellus*, size of a very small walnut each.

Mr. Prescott ate one and a half roots.

In three quarters of an hour complained of burning and numbness of the lips, mouth and throat which soon extended to the stomach.

And was attended with vomiting; first of dinner—then of frothy mucus—no blood at any time—vomiting violent and constant for an hour, and continued more or less until within a quarter of an hour of his death. Dead at 2—emetic was given at half past 4 o'clock,—subsequent vomiting may be attributed in part to the emetic.

His extremities were cold but chest was warm.

Head was bathed in a cold sweat.

His eyes were glaring.

Complained of violent pain in his head, and trembled excessively: the trembling, in part, might be owing to his terror of the mistake he had committed.

His lips were BLUE.

Mental faculties were not disordered—he was neither delirious nor sleepy, but was quite conscious, until within a few minutes of his death.

Had no cramp, spasm, or convulsion—the only approach to it was trembling.

He frequently put his hand to his throat.

Though exceedingly weak, he did not lose his power over his voluntary muscles, for within a few moments of his death he was able, with the assistance of his neighbour, to walk to the water closet.

Bowels not moved until he had taken an emetic and castor oil, and then only once.

Breathing apparently unaffected.

On his return from the water closet he was put to bed, and expired within a few minutes, apparently in a fainting state, death in 4 hours.

His wife, aged 57, took about half a root—was affected in a similar way; had the same burning, and numbness of lips, mouth, throat, and stomach.

And violent vomiting.

She experienced a curious sensation of numbness of the hands, arms, and legs.

She lost the power of articulating, so that she was unable to tell the address of her son—her attempts to speak were attended with unintelligible sounds only.

Experienced great muscular debility, and was unable to stand—in this she differs from her husband, who could both stand and walk.

She felt stiffness of, and difficulty of moving, her limbs.

Had no cramps, spasms, or convulsions—the only approach thereto was the stiffness of the muscles, when she attempted to put them in action, as in her attempts to wipe her face.

Some of the external senses were disordered—thus, though her eyes were wide open, her sight was very dim, and surrounding objects were seen indistinctly.

Hearing was unaffected.

Sensibility of body was greatly impaired—her face and throat were almost insensible to touch.

She felt very giddy, but was neither delirious nor sleepy.

For the most part she was conscious, but at times scarcely knew what was passing around her.

Her body and extremities were cold.

She was frequently pulling her throat about, but she knew not why.

In five or six hours began to recover—and natural warmth returned.

Rum and water and some warm medicine were given.

A child, aged 5 years, was similarly affected, but more slightly.

Except she evinced a slight tendency to sleep.

Like the others she was constantly pressing her hands to her throat.

INTERESTING CASE OF POISONING.

Lancet, (London,) March 25, 1837, p. 13.

A female—Alcoholic Tinct. of root.

About 5 minutes after was seized with a pricking and tingling down her arms and fingers.

And a painful numbness across the wrists.

The tongue and mouth next felt the same.

Then the legs and feet.

In less than 18 minutes her face seemed to her feelings to be swelling.

And her throat growing tight.

Felt sick and made many efforts to vomit.

Her legs failed.

Was almost blind.

Yet conscious of her plight when seen by Dr. Shenven.

Eyes were fixed and protruded, with contracted pupils.

Countenance livid.

Jaws and fauces rigid.

Arms and hands quite cold and pulseless.

Legs and trunk much in the same state, *i. e.* cold and pulseless.

Breathing short, imperfect, and laborious.

While heart fluttered feebly.

Was sufficiently sensible to tell how accident occurred.

In an attempt to give an emetic, a strong convulsion occurred.

Copious vomiting afterward took place.

Five hours after taking poison pulse was becoming full, only 58, and intermitting.

There was less oppression at præcordia.

And pupils were larger.

Recovered.

Pereira says its most characteristic topical effect is *numbness and tingling*.

Applied to eye causes *contraction of pupil*, (like opium.)

When the *root* or its tincture is swallowed, the most marked symptoms are *numbness and tingling of the parts about the mouth and throat, and of the extremities*.

Vomiting.

Contracted pupil.

And failure of the circulation.

The heart appears to be weakened or paralyzed.

And a state approaching Asphyxia is produced.

Convulsions or spasms are not constantly present, and when they are, are probably secondary effects arising from the incipient asphyxia.

In neither of Pereira's 3 cases, nor in short of Dr. Sherwen, did stupor occur,—yet in some recorded instances it has happened. In such cases the stupor probably depends, as Mr. Shorwen suggests, on the condition of the VENOUS system of the brain brought on by failure of the heart's action, and the consequent accumulation of blood on the right (VENOUS) side of heart.

PATHOLOGICAL ANATOMY.

NOACK AND TRINKS, *in man*.

Swollen face, expression of fright on countenance after death. Distended abdomen.

Blue (VENOUS) spots on neck and back.

Great injection of brain.

Brain-mass dotted with BLACKISH points.

Lungs heavy, bluish, posteriorly violet, crepitating but little, and over filled with blood.

Left ventricle was empty, the right (venous) filled with gelatinous blood coagulæ.

Throat, stomach, and bowels as far as coecum very red and inflamed.

The blood vessels, especially the veins of the intestines, filled with blood.

Liver and spleen filled with much BLACKISH blood.

Yellow serum in the abdominal cavity.

IN ANIMALS, (*dogs, cats, wolf, horse.*)

Lungs rose-red and crepitating,—healthy.

Or whitish-red and collapsed.

Or darkish red, here and there blue-spotted, crepitating but little and filled with blood. (Is this venous congestion or inflammation?)

Heart RELAXED, distended, in left (arterial) ventricle red blood, right (venous) ventricle filled with fluid or coagulated BLACK blood, or heart contains in general much BLACK coagulated or BROWNISH blood.

Stomach very much distended, filled with frothy slime, blackish fluid, or FLUID BLACK blood, the folds BLACKISH red, the base much inflamed.

Duodenum and small intestines reddened and inflamed?

Much serum in coecum and colon.

Red spots in rectum.

Wound in thigh to which it was applied looked blue externally;—internally, extended inflammation and sero-sanguineous infiltration of considerable extent, and several spots of extravasated blood were found.

Pereira says experiments on animals have been made by

Wepfer, (Hist. Cicutæ. aq. 1733.

Sproegel (Wibmer, Wirkung. Der Arzneimittell und Gifte, vol 1. p. 33.

Viborg, (Ibid p. 34.

Brodie, (Phil. trans. for 1811, p. 178.

Orfila, (Toxicologie Generale.

Aconite belongs to the *Ranunculacæ* of De Candolle, or crowfoot tribe.

Includes 1. *Ranunculus acris*, or upright meadow crowfoot.

2. *Ranunculus flammula*,—lesser spearwort or crowfoot.

3. *Helleborus Niger*.
4. *Delphinium staphisagria*.
5. *Aconitum napellus*.
6. *Cimicifuga racemosa*.
7. *Coptis foliata*, or golden thread.
8. *Helleborus fœtidus*.
9. *Helleborus viridis*.
10. *Aconitum ferox*.

ON ANIMALS.

Pereira Mat. Med., vol. 2, p. 741.

If a small quantity of the soft alcoholic extract of the root be introduced into a wound, (as into cavity of peritoneum) in a dog, it usually causes vomiting.

Sometimes of a stercoraceous character.

Diminishes the force of the circulation.

Weakens the muscular system, so as sometimes to cause the animal to stagger in walking.

And destroys common sensibility of feeling, without causing stupor.

A dog, under the influence of not too strong a dose, will sometimes follow its owner around the room, recognize him by wagging his tail, when called, and yet be totally insensible to pinching, pricking with needles, &c.

Convulsions do not usually occur until a short time before death, and then they are commonly slight, and rather to be termed spasmodic movements.

He has repeatedly demonstrated these effects to the pupils attending his lectures.

ONE EXPERIMENT.

March 31, 1837—present Mr. Adams, and several medical students.

A small portion of alcoholic extract of Aconite was introduced into peritoneal sac of a strong dog, who had been kept fasting for some hours.

In a few minutes he was evidently affected—was less capable of supporting himself, and leaned against a wall.

In ten minutes was insensible to the pain caused by the introduction of pins into his legs, paws, body, tail, nose.

His sight was unaffected, at least he winked as usual when attempts to strike him were feigned.

Was not paralytic, for he walked, although not firmly.

He recognized several individuals, and wagged his tail when spoken to.

Made violent attempts to vomit.

Then laid down, became apparently weaker, and died without a single convulsion.

At one period the action of heart was slower than usual, and the first and second sounds were unusually clear and distinct (as in dilatation with relaxation of heart.)

Subsequently circulation was quickened.

Respiration not disordered.

Bowels not affected.

Has subsequently found that if a large quantity of alcoholic extract be used, the loss of feeling is not so well marked, for death succeeds in so short a period that the loss of feeling, as distinguished from the insensibility which immediately precedes death, is not well observed.

In rabbits the weakness, paralysis of the hind extremities, and spasmodic movements, are much more marked than in dogs. (I believe almost every drug causes paralysis of hind legs in rabbits.

Leaves, root and seeds, when chewed, causes violent burning pain on the lips and tongue, which often lasts for hours, and is associated with a peculiar sensation of numbness.

See Pereira's cases, man and wife. Also Mr. Sherwen's case.

Aconitum rubbed on the skin causes intense heat, tingling and numbness which continue for 12 to 18 hours.

1 gr. to drachms lard, and small portion applied to eye, causes almost insupportable heat and tingling.

Dunglison says, Aconitine rubbed on the skin, excites sensation of heat and pricking—to these succeed a feeling of numbness and contraction of the part, as if a heavy weight were laid upon it, or as if the skin was drawn together by the powerful and involuntary contraction of the muscles beneath—this lasts from 3 to 12 or even 24 hours.

Matthioli noticed numbness and paralysis of the left arm and thigh, so that he could scarcely move his hand.

Brodie noticed a singular numbness of lips.

Christison has felt numbness and pricking from chewing a single seed. In his case of poisoning there was tingling in jaws, extending subsequently over whole body, and accompanied with a sensation as if of swelling of face.

FIRST EXPERIMENT.

We have several times felt, after putting a few drops of the raw tincture upon the tongue, a numbness and pricking in all parts of the mouth, which soon extended to soft palate, causing the sensation as if the palate had fallen down, and rested upon tongue, forcing one to hawk a spit and swallow frequently. This sensation was exceedingly troublesome and annoying, and lasted for several hours; the mouth and tongue were perfectly moist, and not at all red; soft palate the same, and no very evident relaxation of it.

SECOND EXPERIMENT.

Fifteen drops, taken on a large lump of sugar, caused much less numbness and tingling than a few drops of the raw tincture upon tongue, and very little distress about the palate.

Numbness and creeping, but not painful tingling about face, less in arms, but in a very marked degree in hands, which felt as what is called "asleep." Similar, but slighter, and very transient sensations were felt in the feet

and legs. In the hands they were constant and marked for several hours.

THIRD EXPERIMENT.

20 drops, on sugar, excited very little irritation in mouth and throat.

Pulse soon fell to 62 and 65; became feeble, soft, and occasionally intermitting; heart beats also intermitted about every 15th beat.

Same numbness and feeling as if hands, especially the left, were asleep, without any acute painful tingling at any time.

Similar feelings in a very marked degree about face, especially about mouth and lips.

Very slight, similar sensations in feet and legs.

These sensations, after lasting about two hours, gradually passed over into creeping chills, in the same parts.

A feeling of coldness down oesophagus, like that which occurs after taking peppermint.

FOURTH EXPERIMENT.

Several days after twenty drops caused intermitting pulse and weak, but normal in frequency.

Slight creeping chills—flathy of chills over back and shoulders, frequently, but transiently.

Very peculiar numb, creeping sensation about upper and lower lips.

Frequently repeated sensation as if lower and anterior part of face were firmly compressed from both sides by a heavy, but not painful weight, until the idea became irresistible, that that portion of face was very thin—no change of features were visible, when looking into a glass when this feeling was present.

Several times a numb, heavy, dead feeling, about right elbow joint.

Marked feeling as if a heavy weight, about the size of the palm of a hand, were laid upon the outside of both legs, about 8 inches above ancles.

Feeling of the most strange distortion of countenance, at times as if a single muscle had bulged out to the size of a pigeon's egg—then as if the whole jaw were thrust to one side as in partial dislocation—at other times, as if lower jaw were pushed up or raised into the cavity of the mouth, conveying the idea that the face must look like that of an old man who has lost all his teeth and in consequence has his lower jaw thrown forwards and upwards. No contraction of the muscles of the face was evident to the touch, and face when examined in a glass while these feelings were present in a marked degree, was perfectly composed, without the least trace of visible distortion.

During the whole of this time (about an hour and a half) felt constantly chilly, with frequent flushes of chills.

Several times sensation as if all the muscles of the face were firmly but not spasmodically contracted, attended with a numb, heavy, paralytic like feeling of the whole face, and similar sensations simultaneously in both arms, from shoulders to tips of the fingers, conveying the idea that the arms were paralyzed, although they obeyed the will perfectly and promptly.

Several times repeated sensations as if left upper eyelid was long, heavy, and hung down as if paralyzed, although in the glass it appeared perfectly natural.

In the course of two hours the numb, heavy sensations in the face and arms instead of coming on at intervals, began to be constant.

Sensations as if whole of the body from shoulders downwards was as heavy as lead, while a heavy pressure from all sides and from above downwards seemed to render the whole body smaller in size and stature, while head and neck seemed to retain their natural proportions.

These sensations continued, and felt chilly for four hours when fell asleep at 2 A. M.

At 4 A. M. awoke with unpleasant sensations which urged me to rise, when giddiness, and very heavy headache, apparently about temporal muscles above each ear, with transient nausea and gush of cold sweat set in; intense singing in the ears.

Then an intensely bright and white spot about the size of a small plate appeared before the eyes, both when shut and opened, and it was impossible to determine before which eye it was, although it seemed more nearly in the axis of the right eye. It had the refulgence of highly burnished silver; this gradually changed to a straw or light golden color, then whole field of vision became of a delicate lilac hue, which disappeared to give place to the same spot which was now of a beautiful and bright azure. The whole lasted about half an hour.

At half-past 7 A. M. the heavy, numb sensations had gradually passed over into a slight tingling or formication; and dull rheumatic pains arose about right elbow joint, and in muscles of back and shoulders, viz. in the places where either the chilly, or numb sensations had been most marked.

Felt as after intoxication, not the least appetite for breakfast.

Remarks.—The most marked effect of Aconite seem to be failure of the circulation, and alteration of sensation similar to those which attend commencing paralysis.

It seems to act specifically upon face, especially lower and anterior portion, and upon arms, especially forearms and hands, for when taken upon sugar the sensations about the face and in the arms are much more marked than those in the cavities of the mouth and stomach.

Some authors speak of numbness and tingling, others of numbness and heaviness, we invariably felt numbness, heaviness and a peculiar creeping, we should describe the sensa-

tions as precisely similar to those which are felt when the feet are asleep, without those peculiar acute and painful tinglings which are felt when the foot is put to the ground.

It will also be seen that the illusions of sensation produced by Aconite, are similar to those which ensue when the asleep-foot is put to the ground, with this difference, that in the latter instance the foot feels very large and thick, while the Aconite illusions of sensation are marked by apparent diminution in the size of the affected.

These illusions of sensation would be attributed, by the majority of physicians, to what the French aptly term a *défaut d'innervation*. Parry, however, in his Elements of Pathology, and Therapeutics, ascribes numbness to a scanty supply of blood in the capillaries of the parts affected, and asserts that tingling is owing to, and attends the return of the supply. We leave to others the task of deciding this question.

It is well to add that the experiments were made with the Alcoholic tincture of the Root, obtained from Adamson, corner of Broadway and Fourth Street; and that it is supposed to be the only preparation in America which will excite the peculiar sensations described, but which, as the experience of Pereira, Christison, Brodie and others prove, are certainly the peculiar and specific effects of Aconite.

PHOSPHORUS.

This is one of the best remedies in Pleurisy, which is so often accompanied by tuberculous affections of the lungs. It is equally well indicated, when there is a complication with pneumonia or bronchitis.

CASES OF PRACTICE.

BY DR. WARD,

ALBANY.

MY DEAR DOCTOR,—

I have lately transcribed from my note-book a few cases, which, if you think will tend in any measure to elucidate the principles of Homœopathia, or be of any service to the young practitioner, you are at liberty to use.

CASE I.

RHEUMATIC GOUT.—A. B., aged thirty-five, of robust constitution, and sanguine temperament, accustomed to the use of *wine at dinner*,—after exposure to cold, was attacked with an arthritic inflammation of the joint of the great toe. On my first visit at 4 P. M., I found the joint excessively swollen, red and shining, with preternatural heat; all motion of the joint was exceedingly painful. I directed three drops of the first dilution of Bryonia to be given in a half gill of water, of which the patient had instructions to take one tea-spoonful, and repeat the dose every four hours until some perceptible effect was experienced. At the expiration of two hours I was informed there was an aggravation of all the symptoms, which being the case, I directed a discontinuance of the medicine until my visit the next day. The aggravation soon passed off, and at 11 o'clock my patient was comparatively comfortable, at which time, unadvised, he took another spoonful of the Bryonia, and experienced again the same aggravation of his sufferings, which did not fully subside until 4 o'clock the following morning. The cure was completed by the use of Bryonia of a higher potency, repeated every eight hours, for the four succeeding days.

CASE II.

ACUTE RHEUMATISM.—A female with rheumatic inflammation of the wrist-joint, attended with high fever, white-furred tongue,—had passed the previous night in excessive pain, without closing the eyes in sleep. I found her with the arm reclining on the pillow, unable to raise the same to the head, or to bear the pressure of my finger, (that was necessary to ascertain the state of the pulse,) without giving expression to her sufferings. As Bryonia was the remedy indicated, I dropped four drops of the 2d dilution in twelve teaspoonfuls of water, of which she was instructed to take a teaspoonful every two hours. In six hours the pains were so far arrested as to enable her to raise her arm, and move the joint with comparative ease. In forty-eight hours she was well and discharged *cured*.

CASE III.

CHRONIC ERUPTION.—A case of chronic eruption, of some years duration, covering the face and forehead,—thickest in the margin of the hair and whiskers,—in appearance like rum-blotches, at times red and highly inflamed, and attended with severe itching, so that the patient was constrained, contrary to his better judgment, to scratch. Had resisted the alternatives of the old school, and a course of sulphur water, at one of our fashionable watering places. Was cured with *Calcareæ* of the 1st attenuation. A dose was given morning and evening. I occasionally interposed a dose of Hepar. Sulphur. Other remedies had been tried, among which was *Lycopodium* and *Hepar*. but neither of them produced any permanently good impression. Two years have now elapsed without any recurrence of the disease.

CASE IV.

COUGH.—A hard, dry, and shaking cough, almost incessant, attended with shooting pains

through the lungs under every cough,—had continued for twenty-four hours, and resisted the action of other medicaments. It was immediately arrested under the operation of Phosphorus. I prepared four doses, and directed one dose every six hours. The patient took the first dose, and did not cough again. Dspring the prevalence of the epidemic that has recently swept over our country, when the cough was one of the above described character, (if the temperament was one in which this remedy was indicated,) I have rarely, if ever, found it to fail in arresting the symptoms, particularly if soreness of the lungs, or shooting pains through the chest, characterized the cough. From the trials I have made, I am satisfied it is one of our most efficient homœopathic agents, in affections of the lungs, and equally well convinced am I, that within the last three years, I have rescued a greater number of patients from that foul destroyer of our race, *Consumption*, with this one remedy, than I did during twelve years extensive practice in one of our Atlantic cities with all the heroic remedies of the old school.

CASE V.

MANIA.—It should be matter of heartfelt joy to every humane physician, that necessity does not compel us to deluge this class of unfortunate patients with drugs, nor oblige us to resort to the violent depletory means which have characterized the practice of the old school ;—to arrest the progress of this frightful malady, as the following case will abundantly testify. *Miss A.* aged thirty, of nervous temperament, active imagination, and acute sensibility suddenly became taciturn and melancholy, avoided the company of her friends, soon exhibited a great contempt for others, and next evinced a desire to make war upon her nearest friends, and particularly a disposition to destroy every thing on which she could lay her hands. In gratification of this spirit, different articles of

clothing were torn into strips,—the furniture of the toilet was thrown into the fire, and the Bible, which had been her constant companion for years in her retirement, was thrown from the window into the street. *Nux*, *Pulsatilla*, *Platina*, and *Stramonium*, (the last two of which seemed particularly indicated,) were given without any alleviation of her symptoms, and the *Nux*, from which I hoped for much, as her bowels were constipated, proved of as little service. I then gave one drop of the 1st dilution of *Veratrum* at night, and so strongly did it grapple with and speedily arrest the disease, that on visiting my patient the next day, I was surprised as well as delighted to find her, in the beautiful language of inspiration, “clothed and in her right mind.” I admit that this was one of our splendid cures, and yet it is but *one* of the *many* trophies of the triumphs of our science, which all worthy of the name of Homœopathists are permitted to witness. That a disease like *Mania*, which (up to that hour for an entire month,) had resisted the operation of all the remedies tried, should in one night yield to the single dose of a remedy, though homœopathic to that condition of symptom, is so like the operation of a miracle, that, “no marvel” we are not credited when we “speak that we do know, and testify that we have seen.” The patient, a lady of superior intelligence, and in the higher walks of life, since that time, (now near twelve months) has not exhibited the least mental aberration.

CASE VI.

CROUP.—In the circle in which I prescribe, where the efficacy of homœopathic treatment has been tested for nearly *ten* years, the *croup* is spoken of as a disease that is as readily controlled as the *cholera morbus* or a *diarrhea*; and hence the impression very generally prevails, that if parents permit their children to die of a *croup* or a *scarlatina*, without resorting to Homœopathic remedies, they are culpable for such

neglect. In the treatment of about forty cases within the last two years, I have witnessed but *one* unfortunate case, and that I attributed to the use of a large quantity of *Onion Syrup*, administered before I was called to prescribe, which on account of its being an antidote to Homœopathic remedies, induced me to prescribe an *antimonial emetic*. After which I resorted to the usual remedies only to witness their failure. I have usually given *Aconite* in the 1st dilution, one drop every half, whole, or alternate hour, when the disease was attended with high inflammatory fever, and continued this until it was controlled, and then followed or alternated it with the *Spongia tosta*, or *Hepar Sulphur*, until the cure was completed. In other cases, *Hepar Sulphur*, either alone, or alternated with the *Spongia*, especially when the cough has been hoarse, hollow, and croaking, unattended with fever, has uniformly proved the specific.

A case, in which there was a complication of *croup* symptoms, with the asthma of Miller, that resisted the operation of all the remedies above named, yielded to a dose of *Sambucus*. One drop of mother tincture, arrested all the symptoms, and from a state in which life was despaired of, the patient fell into a gentle sleep, and from that time convalescence rapidly progressed.

My little daughter, five years of age, of uniformly good health, sanguine temperament, and plethoric habit of body, during the month of March last, was exposed to cold while playing in the garden during a fall of snow. She retired to bed at her usual time in the evening apparently well. At 11 o'clock we were awakened from sleep by the oppressed breathing of the little sufferer, who said in the emphatic language of a child, “it hurt her to breathe,” and pointed to her Larynx as the seat of the pain. I found her under a burning fever, pulse quick, strong and bounding, skin hot and dry, with the other attendant symptoms of high inflammatory

excitement. I gave one drop of the 1st dilution of *Aconite*, and continued it every hour during the night, with but little alleviation of the symptoms. The *Aconite* was so highly indicated that I could not substitute a remedy for it with any prospect of success, and therefore continued it.* I watched its operation. The disease seemed held in subjection, though not fully controlled. I lengthened the interval, and gave a higher potency, but found the general fever with the local symptoms, pain in the Larynx, with the shrill and squeaking sound in respiration, as well as the harsh and sonorous cough becoming more strongly developed. I then gave four drops of the 1st dilution every hour and continued it through the day, and found to our joy that the disease gave evidence of being controlled. The fever abated, a gentle moisture made its appearance over the entire surface of the body, and the local symptoms gradually subsided. At the expiration of twenty-four hours, I regarded the patient out of danger, and from that time she rapidly convalesced.

PANICUM MILIACEUM IN DROPSY.

Doctor Thummel, of Berlin, recommends a decoction of the *Panicum Miliaceum*, or poison parsnip, in this disease. The taste of this drink is not at all unpleasant, and is preferred by the patient to any other infusion.

* The remark cannot be too strongly enforced upon the mind of the young practitioner in Homœopathia, that if a remedy is strikingly indicated as the specific remedy for a particular condition of system, the administration of the remedy must be persevered in, and frequently repeated until a mitigation of the disease is obtained.

CLINICAL OBSERVATIONS ON PULSATILLA,

By Dr. CROSERIO.

Translated from the *Annales de la Médecine Homœopathique*.

By P. P. WELLS, M. D.

PULSATILLA.—The Meadow Anemone, *Anemone Pratensis*, of Linnæus, belongs to the class Ranunculaceæ, all the members of which possess strongly acrid and irritating properties. Stoerck, professor in the university of Vienna, made many experiments with the species under consideration. Unfortunately they were chiefly limited to its effects on the sick, but among the results which he published is a small treatise, entitled *Libellus de usu medico pulsatillae nigricantis*, 1771, are described, in the most precise manner, some of the homœopathic effects of the powers of this plant observed by Hahnemann. Stoerck may be regarded as the precursor of Hahnemann in maintaining that the more a substance possesses poisoning power, the more valuable it may be in the treatment of disease; but, he had no criterion by which to judge of and apply those powers; he lacked a knowledge of the homœopathic law, and, as yet, there had been no pure experimentation. He tried this medicine both on himself and his pupils in health, thus coming near to the truth, the discovery of which divine providence had reserved for our great master. In these experiments Stoerck contented himself with ascertaining in what doses the plant could be given without producing poisonous effects.

He prepared a distilled water from the whole plant except the root, which he found too acrid; and an extract of which he made powders with sugar in the proportion of 5 and

10 grains to the oz. of sugar. He also employed an infusion of *zi* and even *zi* to the pint of water, of which he gave *zi* at a dose. He took 5 and afterwards 10 grains of the powder, twice a day, with no other inconvenience than a lancinating pain in the right eye, in which he had received a blow two years before.

The external application of *puls.*, according to this experimenter, was beneficial in the case of a woman 30 years of age, in alleviating the rigidity of an emaciated limb consequent on rheumatism. During the first days of its employment, the urine became abundant, and there were slight efforts to vomit.

A priest, ninety-three years of age, with paralysis of the right side, was unable to continue the use of this remedy on account of the frequent vomitings which followed a very small dose.

Very violent pains, recurring every morning, after the healing of syphilitic ulcers, were cured by this medicine, as was also a chronic gonorrhea with indurated testicle, the induration remaining unaffected.

A widow of forty-two years, with calcareous concretions and syphilitic pains in the joint, blind of the right eye from an opacity of the whole cornea, of twenty years' standing, catamenia suppressed for three months, obtained restoration of sight, and a diminution of the pains and concretions by the use of *pulsatilla*.

A patient of twenty-one years was cured of obscurity of vision and schirrous induration of the parotid; but he had pains in the eye as if it were scraped with a knife, profuse lachrymation, diarrhea, and copious urine. It was useful in paralysis of the inferior extremities, in violent pains in the sacrum, and in venereal ulcers (probably mercurial) of the throat and tongue.

A man aged thirty years, with large ulcers, the openings of lymphatic abscesses on the scapula and elbow, with swelling and rigidity

of the knee, and marasmus, took *puls.* with success: as did also a domestic with a very fetid ulcer on the tongue. A female was cured of a venereal ulcer with caries of the os frontis, (mercurial) by this medicine. A servant twenty-four years of age had suffered long from a lymphatic tumor of the knee joint, which discharged a turbid lymph, and was attended with pain in the joint and emaciation. *Puls.* arrested the pains and discharge, and procured repose for the patient.

A man aged forty years, had amaurosis of the right eye, with glaucoma of the left, the sequels of severe, acute disease. *Puls.* diminished the glaucoma, the iris of the right eye regained its contractibility, and the patient was able to perceive the light of a lamp. A boy thirteen years old, had a red, livid tumor of the external angle of the right eye, the cornea of which was covered by a dense albugo. 10 grains of the powder excited violent pains in the tumor and eye. The remedy was continued, the tumor suppurated, burst spontaneously, and discharged a healthy pus. At the expiration of a month the tumor had disappeared and the eye regained its transparency. The remedy was also serviceable in seriginous eruptions and cataract.

An old woman had been 20 years deprived of the sight of her left eye, by an acute ophthalmia. The ball was much enlarged when she took *puls.* It was followed by a purulent discharge from the nostril, and the interior surface and margin of the eyelids, diminution of the volume of the eye, and restoration of vision, so far as to enable the patient to discern objects. A cataract in an old man, of seven years duration, was also cured by *puls.* in 12 days.

According to Stoerck it cured melancholy, excites, restores, and regulates menstruation, and is serviceable in chronic diseases of the eye. This remedy, which produced effects so marked and salutary, in the hands of this dis-

tinguished physician, had been entirely forgotten and neglected by the schools, till the genius and experiments of Hahnemann placed it in its appropriate rank among therapeutic agents. In the collected observations of Homœopathists are many cases of diseases analogous to those reported by Stoerck, mostly obtained by the thirtieth dilution of the remedy.

The founder of Homœopathy has evinced his talent as an observer in the general remarks with which he precedes the pathogenesis of pulsatilla, and with which he has enriched some of its symptoms. But this very talent limited him to general observations which were to be regarded rather as conditional than absolute. Thus its recommendation in cases characterized by frequent shiverings, is subject to many exceptions in practice, both in acute and chronic diseases, when the group of symptoms corresponds perfectly with a remedy which also accords with symptoms 563, 568, 570, 573, 577-8, 580, de. The same is true of absence of thirst, 215-6-7-8-9, 947-8-9, 950-1. These are ever to be regarded as important symptoms, and not as deciding the choice of a remedy, no one symptom ever having this power in Homœopathy.

The mild and timid disposition inclined to sadness and tears, so characteristic of pulsatilla, is to be regarded in the same light. See symptoms 1024, 1026, 1045-6. Some months since I was called to attend a young lady, about 18 years of age, with chronic metritis. She had suffered much from irregular menstruation, the discharges being retarded and in small quantity. Since her confinement, nine months ago, the catamenia have appeared only once in six weeks, and not at all the two months previous to my first visit, though she exhibited no other sign of pregnancy. During this last period she had lancinating pains in the uterus, extending to the sacrum; the whole abdomen was painful under pressure; several times in a day, especially during a meal, or

when moving or on the least contradiction, or in the night, she is seized with violent pains in the abdomen and loins like the pains of labor, which forced her to loud outcries for several hours, and finally terminated in fainting. These attacks commence with shiverings; she is disposed to chills during the whole day; she has neither appetite nor thirst; nausea, especially in the morning; obstinate constipation lasting eight days; constant inclination to sleep when free from pain; sleep heavy; *excessively angry, violent, hasty, obstinate, wayward and spiteful to those about her.* Neither this peculiarity nor the constipation prevented my giving *puls.* 18, gtt. i. in a glass of water, a table spoonful to be given every ten minutes during the attacks, and three times a day when free from them. The paroxysm yielded to the first spoonful, and disappeared in less than a quarter of an hour. The remedy was continued for six weeks and effected a perfect cure. The catamenia appeared the eighth day, without pain, and returned at the regular period; the uterine pains entirely disappeared, the appetite and alvine evacuations became regular, but the patient remained angry and spiteful.

Exacerbation in the evening, especially in acute diseases which attain their greatest intensity about midnight, when the patients are awakened in fright from light sleep, by terrifying and anxious dreams are also peculiarly characteristic of pulsatilla. On this account it is better to administer the remedy early in the morning.

As to the dose and attenuation, each from the 3d to the 30th may be required. I generally employ that indicated by Hahnemann in the 3d edition of his *Mat. Med.*, i. e. the medium attenuations; but frequently use the 30th without perceiving any essential difference in its action. On one occasion a decided aggravation of an attack of vomiting, which had continued 24 hours, followed on taking a table

spoonful of water from a glassful in which a very small globule of the 30th dilution had been dissolved. It was given at the dusk of evening. Gentle sleep and a perfect cure soon succeeded. In Chlorosis and Amenorrhœa, the lower attenuations are preferable.

The temperaments for which *Pulsatilla* appears to manifest a preference, are the nervous and lymphatic, with pale complexion and fine skin, it has also a predilection for females and children. Herring has observed that it acts powerfully on the inhabitants of South America.

This remedy, so rich in symptoms, and so carefully studied by the author of the *Mat. Med. Pura*, rightly regarded as a polychrest, is suitable in so great a number of diseases, that it would be necessary to pass in review the entire nosology, if all the cases were to be collected in which it had been, or could be useful. In the present instance I shall limit myself to cases which have been verified by my own observation.

Recent inflammations are not within the province of *Pulsatilla*, though different inflammatory conditions, and consequences of inflammation, often require its exhibition. The inflammation, called by Brown, asthenic, in which the venous system appears to be chiefly involved, and in which the affected part appears somewhat deep-colored, (*foncé*) the patient has shiverings and other symptoms of *pulsatilla*, and also where the inflammation threatens suppuration, or an abscess has already formed, and in the wounds and ulcerations for their opening, this remedy is often indicated.

Ophthalmia of a catarrhal character, with sensation of pressure and burning in the eye, inflammatory swelling of the lids, photophobia, and free lachrymation demands *puls.*; as when the inflammation covers the conjunctiva, and there is burning, pressive pain, exacerbations in the evening, and sensation of dryness

of the eyes; or when the lids are agglutinated in the morning by abundant mucosity, with obscured vision. Ophthalmia which accompanies or succeeds measles, and that called scrophulous, also sometimes require *puls.* In common with *ignatia*, it is particularly useful in reducing the sensibility of the eye, which sometimes remains after the cure of ophthalmia.

I have seen hordeolum cured in a few hours by *puls.* 12, when the swelling of the lids was slightly deep colored, the patient of a scrophulous constitution, and inclined to tears. An abscess in the angle of the eye, one of its primitive effects, indicates a presumptive utility in *lachrymal abscess* and *fistula*, which I have cured with this remedy in young girls with irregular menstruation.

Pulsatilla has great affinity for the ear. Both internal and external inflammation of this organ yield more readily to it than to Aconite. The *otalgia*, so painful in young children, accompanied by tears, I have often seen yield to a single inhalation of the 30th attenuation. Purulent discharges from the ear at this age, are easily cured by repeated doses of this remedy, as is also the consequent hardness of hearing, or that which occurs during the second dentition, or as the sequel of measles.

In the *angina* which requires *pulsatilla*, the fauces are of a deep red, the patient has a sensation of swelling in the throat, like a plug, especially while swallowing; pricking while swallowing, but more when not swallowing; a creeping, with dryness and without thirst; the cervical glands are painful to the touch; the throat is swollen externally, with tensive pain; chills in the evening, followed by heat without thirst.

The partiality of *pulsatilla* for mucous membranes, renders it very valuable in many catarrhal inflammations. In *coryza* with sneezings and abundant discharge of thick, yellow,

green, or offensive matter ; loss of smell and taste ; frontal cephalalgia about the root of the nose ; inappetence, without thirst, chills in the evening, *puls.* $\frac{12}{60}$, given on retiring, ordinarily removes the symptoms in the course of the night.

Hoarseness, with bruised sensation and picking in the larynx ; coryza as above ; moist cough, with pain in the chest, and complete loss of voice, responds to *pulsatilla*. It is also suggested in *bronchitis*, by its known disposition to excite mucous discharges. It is indicated when the cough, dry in the early stage, becomes moist, with easy expectoration of abundant yellow and bitter, or saline and disgusting matter ; sometimes with nausea, or retching, (*haut-le-corps*) or a sensation of reversion in the stomach, as if about to vomit. The cough is excited by tickling or itching in the larynx, or by scraping or dryness in the trachea. It occurs especially at night, and on lying down ; is relieved by rising and sitting on the bed ; it is accompanied with fatiguing pains in the abdomen, and stitches in the back ; it is frequently followed by stitches in the shoulders and sides, or fatigue in both sides of the chest. But if these symptoms are not attended by the general indications for *pulsatilla*, it should be administered with caution, as in such cases it often changes the loose and easy cough to a dry and fatiguing one, and evidently aggravates the disease.

The venous character of *pulsatilla* adapts it to *hæmoptysis* of dark, thick, clotted blood, when the other symptoms correspond to this remedy ; viz. ; anguish at night, shivering, debility, painful vacuity in the stomach, sadness and tears and a fear of death. A young girl of my dispensary, with the above symptoms, and an habitual delay of menstruation, which had continued three weeks at the time of prescription, was cured in six days by *puls.* $\frac{12}{60}$ every morning. The catamenia appeared the sixth day, and the hæmoptysis ceased at the same time.

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Its affinity for mucous membranes has induced me to employ it in some cases of *gonorrhœa*, and with advantage ; especially when the severe pains had been relieved by *Cannabis*, and there succeeded compressive and drawing pain (*tiraillante*) in the urethra, itching of the inner surface of the prepuce and corona glandis, discharge thick and copious, frequent and urgent desire to urinate, *puls.* 12 removed the disease, or it only required in addition a single dose of *Sulph.* for its perfect cure.

Colorless *leucorrhœa*, with abundant discharge of thick mucous or milky fluid, corresponds well with *puls.* ; and when it is accompanied with dysmenorrhœa, chilliness, timidity, and tears, it is of great value in this obstinate disease.

The digestive organs are much affected by this remedy, and from the slightest inappetence to the gravest maladies which invade them, many cases are met in which it is indispensable. The characteristic symptoms for it are, repugnance to food, especially to milk, warm aliments, meat, stale bread, and absence of thirst.

Gastralgia requires *pulsatilla* when the pains in the stomach are lancinating, aggravated by walking, especially by a false step, constant nausea or vomiting, with diarrhœa ; absence of thirst, except during the severity of the pains, violent throbbing or tension, and squeezing in the epigastrium, with anguish ; sometimes a sensation of gnawing, which is relieved while eating ; sometimes after a meal, weight in the stomach and pinching ; or when the pains are caused by fat food, and in subjects appropriate to this remedy.

Gastritis, when produced by fat or indigestible aliments, finds at its commencement a suitable remedy in *puls.* ; or when, with the above symptoms, there are protracted taste of food and drink ; or bitterness, sensitiveness of the stomach to pressure, foul tongue, loaded

with a yellow, white, or gray coat; mouth pasty, all ingesta have a bitter or insipid taste, constant nausea, &c.

In *bilious fever*, when, with these symptoms, there are shiverings in the evening, with absence of thirst, or dry heat and shivering with thirst and sadness, *puls.* will be appropriate.

Diarrhœa, with pultaceous, mucous, liquid, or fetid discharges, which produce burning or excoriation of the anus, with nausea; regurgitations, colic, discharges more frequent at night, or which has been produced by fat ingesta, yields readily to *puls.*

Hepatitis. The predominance of the venous system in the liver, insures to this medicine great efficacy in its diseases. It is indicated when there are tensive or lancinating pains in the right hypochondrium, swelling of this region, and of the epigastrium; the patient has a sense of fulness of the stomach, augmented by eating and drinking; piercing pain (*douleur pongtive*) in the shoulder blade, exacerbations in the evening, and about midnight; vomiting of bile, and aggravation of the lancinations and drawing pains in the back, and about the right shoulder blade; green bilious diarrhœa at night; dorsal accubitus; sleeplessness, produced by internal heat; slight shiverings; during the evening exacerbation of the pains; swelling and redness of the superficial veins, notwithstanding the shiverings and chilliness of the limbs, produced by a disposition to hæmorrhoids. *Pulsatilla* was very serviceable in a case of this description, in an English girl of timid and tearful temper, with chronic amenorrhœa.

Icterus. Yellow skin, pasty mouth, bitter taste, foul tongue, loss of appetite, adipisia, disgust at food, weight, uneasiness, and fulness of the stomach, whitish fur, turbid urine, are symptoms too characteristic for *puls.* for it to fail of being often useful in this disease. In a recent case, with these symptoms and a very slow pulse, *puls.* $\frac{12}{60}$, alternated every

other day with *digitalis* $\frac{1}{60}$, effected a perfect cure in eight days, although the patient was compelled to labor diligently with her needle, as soon as her strength enabled her to sit up, without the least exercise in the open air.

In *engorgement of the prostate*, *puls.* $\frac{18}{60}$ every second morning, for three weeks, with suitable regimen, was very serviceable in a man of fair skin, lymphatic temperament, and feminine voice, 34 years of age, and who had had scrofulous swelling of the glands in his youth. He had pressure and burning pain in the neck of the bladder, (where, on touching per rectum, was found a tumor as large as a hen's egg,) frequent desire to urinate, tenesmus, especially at night; the urine was discharged frequently, in small quantity, in a slender stream, and deposited mucous, stools loose, frequent chills, very sensitive to cold, and sleeplessness.

Orchitis, when resulting from repercussion of gonorrhœa, with tension and swelling of the spermatic cord, pains drawing or lancinating through the whole track of the cord to the testicle, *puls.* 12 gtt. in a glass of water, a table spoonful every two hours, has almost invariably succeeded with me, even when the fever has been intense, for then it has usually been mingled with the shiverings so characteristic of this remedy. When the disease is the result of mechanical injury, such as catheterism, contusion, or muscular effects, *arnica* is more suitable.

Pulsatilla has a powerful influence over the diseases of the female sexual organs, and the derangements of their functions, and from puberty to old age, it is difficult to dispense with this remedy, in the treatment of the diseases of this sex.

Chlorosis, when fully developed, affects the whole organization so profoundly, that it certainly cannot be cured by a single remedy; but *puls.* will assuredly prove serviceable when the patient has constant coldness and shiverings,

paleness, oppression; want of breath on the least movement; palpitation, violent and agitating, with *bruit de soufflet*; sensitive to external impression, so that the least excitement produces suffocation, like cramp in the chest, the catamenia has not yet appeared, or only in very small quantity, and at irregular intervals; or if it has appeared has been insensibly diminished or retarded, till it was replaced by leucorrhœa. In such cases the lower attenuations generally produce a more prompt and certain effect. Other remedies, according to the concomitant symptoms, are often indispensable; *sulph.* for example, if the constitution be venous and phlegmatic, with a disposition to hæmorrhoids; or if there be nervous and hysterical excitability; or in other circumstances *Verat. Ignat. Nat. mur. Lycop. Plat. Hyoscy. Sabin. Canth. Lach. Graph. &c.*, may be required, but *puls.* will always be found at least, a precious intercurrent remedy.

Menstrual colics. Before the catamenia, or a few hours after its appearance, the patient has weight in the hypogastrium like a stone; pressure in the pelvis and about the loins; drawings in the thighs; torpor of the lower extremities while seated; painful pressure on the sacrum, like indications to stool, and pain in the back; clouded vision; nausea and aqueous risings; shiverings, stretchings, and yawnings, with insufficient or retarded menstrual flux. Dr. Romani has cited a case with these symptoms, in which *puls* 12 alternated every fifth day with *verat.* 18, effected a perfect cure in three months.

Some cases of *metrorrhagia* find in *puls.* a Homœopathic remedy; but the attendant symptoms should have great similarity to those of the medicine, in order to its successful employment; for profuse menstruation is a secondary effect of *puls.* and the blood is thick, black, and coagulated.

I have given, at the commencement of this article, a case of *chronic metritis* cured by

puls. The characteristic symptoms of this remedy, expulsive pain in the uterus, every morning, with nausea; contractive pains in the right side of the uterus, which force the patient to bend forward; lancinating pain in the cervix uteri; burning in the vagina and labia majora; point out the numerous cases in which it will be demanded in this disease, after the acute stage, if it have existed, has been subdued by *aconite, bell.* and *natrum.*, according to the predominant symptoms. When it has its origin in suddenly suppressed menstruation, after a dose of *aconite, puls.* is generally sufficient for the cure.

Pregnancy presents many morbid phenomena which are speedily relieved by *puls.* The nausea and vomituration of its first months, especially if the ejected matters contain bile, if there be relaxation of the abdomen, sadness and discouragement, in a delicate and nervous patient, yields readily to a dose of *puls.* About the fifth or sixth month of pregnancy, patients often have some spot painful on the least movement, and pressure on the fundus uteri, which prevents their remaining in bed, symptoms which I have always relieved with *puls.* A sense of weight in the pelvis which prevents an erect position, frequently occurs at this period of pregnancy, and is often removed by this remedy, but if it prove insufficient, should be followed by *sepia*.

During parturition, when the pains return at too long intervals, or are too feeble, and when they are too much in the loins, *puls.* is far preferable to *secale corn.* In this case it is sufficient that the patient smell for a few seconds a phial containing some globules. The pains become regular, expulsive, and are attended with less suffering to the patient, and the termination of labor speedily follows.

Four years ago, attending a lady who had been several hours in labor, without any change in the character of the pains indicating its advancement, I found on examination the

os uteri half dilated, and a hand of the fœtus presenting through the unruptured membranes. In this state of things, the pains having abated, I caused the patient to inhale slightly from a phial of *puls.*, so that, by continued pains, the os uteri might be dilated, and permit the introduction of the hand for turning, without violence to the cervix. A few minutes after the inspiration, the patient had evident shivering, which was followed by an extraordinary pain, as if the contents of the abdomen had been turned over; some minutes after she had another pain of expulsive character, the membranes were ruptured, and the waters were discharged. I hastened to ascertain the state of things, in order to seize the favorable moment for the turning presumed to be necessary; when, to my great delight, I found the head engaged in the strait in the first position! In ten minutes the child was expelled. A similar case of version of the fœtus, effected by *puls.*, during labor, is related by Dr. Bethmann.

This remedy has also been serviceable when the contractions are very painful, without advancing labor, only exhausting the powers of the patient. Whatever be the cause of this phenomenon, whether it depend upon the twisting of the cord about the neck, which is always attended with a sensation of weakness and sinking, as if something were being torn away from the stomach; or whether it depend on an unfavorable position of the head, *puls.* always has a salutary effect on it. I recommend inhalation of the remedy merely, because the susceptibility of the patient is always exalted during labor, so that a stronger dose is often followed by contractions so violent and rapid that it may be difficult or impossible to prevent those terrible accidents which are liable to occur.

The expulsion of a retained placenta, if unattended by violent hæmorrhage, may be accelerated by *puls.*; but if there be hæmor-

rhage *secale cornutum* is preferable, if the case be not so urgent as to warrant its immediate extraction by introducing the hand.

Suppression of the lochia, whether the result of chill or sad moral impressions, yields to *puls.*, if there be not already developed inflammation in the abdomen or head. In this case it will not be given with success unless the symptoms of the new disease are appropriate to it.

Agalactia. In many cases where the milk is not secreted at the proper time after confinement, without the patient exhibiting any other morbid phenomena, I have given *puls.* $\frac{3\text{ss}}{\text{ss}}$ in a glass of water, a tea spoonful every two hours, usually some minutes after the first dose, there were sensations in the breast indicating the pressure of milk, and there was no call for a second dose. If the constitution of the patient, or other circumstances, precluded the use of *puls.*, or if, after four or six hours, it produced no good effect, I gave *agnus castus*, in the same manner. In the *agalactia* which sometimes occurs during nursing, preference must be given to the remedy most appropriate to the removal of the occasional cause of the suppression. *Puls.* will be indicated if that cause were a chill, or a sad moral impression.

If, in consequence of either of the above mentioned causes, the patient have frequent shivering, alternating with suppressed perspiration, disappearance of the milk, increase of pale lochia, excessive lassitude, sleep interrupted by many dreams, *puls.* may arrest these symptoms, and prevent the development of puerperal fever.

Phlegmasia alba dolens, being an effect of phlebitis of the crural or obliator veins, finds, in many cases, a very powerful remedy in *puls.* It is ordinarily caused by a chill of the thigh, and sometimes the whole extremity becomes swollen, hard, shining, white, and œdematous, with rending pains, tensive and drawing, ex-

acerbated at night, increased by pressure, dry heat, alternating with shiverings, bitterness of the mouth, nausea, and even bilious vomiting. Sometimes the disease presents other symptoms, which require bryonia, arnica, ars. and sulph. I have found good effects from alternating puls. with sulph.

The diseases of the critical age, as well as all those originating in suppressed menstruation, should remind us of puls., when selecting a remedy for their cure. At this period the venous system assumes a more decided development, and thus establishes relationship with this remedy. When, in consequence of deranged catamenia, the patient experiences gastric, abdominal, or cerebral sufferings, it is rare that a train of symptoms are not presented suitable to this medicine. It establishes the discharge, for some time at least, and the crisis is then passed without accident. I have found many cases, however, which called for sulph.

Hemorrhoids are sometimes a source of suffering to pregnant females, but especially so to those lying in. Puls. has always succeeded with me in removing them very promptly. Madame M—, small, feeble, exhausted by frequent confinements, in which she had suffered much from hemorrhoids, in her ninth pregnancy, the second day after delivery, the tumors became so large and painful as to prevent all repose, and what was more alarming, to interrupt entirely the emission of urine for twelve hours, notwithstanding all the palliatives which the nurse had employed to induce its discharge. I determined to resort to the catheter, to put an end at once to her sufferings and danger, but wished first to try the remedy which had so often succeeded with me in relieving the hemorrhoids of lying in patients, I gave *puls.* $\frac{\text{ss}}{\text{ss}}$ without leaving the patient, that I might be at hand to employ the instrument, if the medicine should fail of its desired effect. In a few minutes after receiv-

ing the dose, the lancinations in the hemorrhoids diminished gradually, and in fifteen minutes the patient had a natural emission of a large quantity of urine. The tumors gradually disappeared, and gave the patient no further inconvenience. The relief produced in circumstances so painful, so far surpasses the resources of the medicine of the schools, and is so precious, that if the means of attaining it had been discovered by an Allopathist, it would have rendered his name celebrated throughout the medical world.

Acute rheumatism, which is characterized by very painful swellings of the joints, which pass frequently and suddenly from one joint to another, if it is accompanied by perspiration at night, especially towards morning, with other febrile symptoms of puls., yields surprisingly to this remedy, repeated in low attenuations. Bryonia is likewise suitable in erratic rheumatisms, but its changes are neither so frequent nor so sudden, and the swelling is not so exclusively confined to the joints.

Measles, among eruptive fevers, is especially the province of puls. It is to this disease, almost what belladonna is to scarlatina. I have given in the *Bibliothèque Homœopathique*, some observations on its remarkable effects. I have since had opportunity to convince myself that it may also be a valuable prophylactic in this disease. The precursory symptoms of measles accord perfectly with the febrile symptoms of puls., viz. : chills, heat, lassitude, throbbing pains in the head, anxiety, nausea, vomiting of bile or glairy mucus, violent coryza, red eyes, lachrymation, photophobia, &c. Then follows pricking of the skin, red spots like flea bites, excoriation and creeping in the throat, difficult deglutition, dry fatiguing cough, epistaxis, &c. If administered in the precursory stage I have often seen the disease terminate in abundant perspiration in twenty-four hours. The consequences of repelled measles are often successfully combatted with puls.

when caused by chills. Sometimes however, bryonia is preferable if the thoracic organs suffer especially from acute vascular excitement. In this case a dose of Aconite may be required.

Les Annales de l'Homœopathie contains accounts of cures of intermittent fevers by *puls.*, but in Paris I have had no opportunity to observe cases of this disease which demanded its use.

Chillblains on the hands or feet, ulcerated or not according to the character of the inflammation, have much affinity with *puls.*, and when the patient has the corresponding physical and moral constitution, we may predict prompt success with it. In children, and young girls with deficient menstruation, it may be given with confidence. The cures which I have so often attained by it, induced me to give it to a young Portuguese whose fingers were much swollen and livid with chillblains notwithstanding her brown complexion, and abundant menstruation; but it produced no effect whatever. I was compelled to resort to *sulph.* and other antiphlogistic remedies.

Varices on the legs. An English lady, 43 years of age, had tension and painful pricking in the inferior extremities, which prevented her being long in the erect position. *Puls.* always relieved her of these symptoms, and its continued employment has much diminished the size of the varicose veins. Sulphur, silica, and lachesis, are, however, more frequently indicated in varices of the extremities.

TOBACCO AGAINST HEMORRHAGE.

A concentrated decoction of Tobacco leaves, applied to a wound which had resisted all the known hæmostatics, arrested the hæmorrhage at once.

LETTER OF DR. KIRBY

RESPECTING

DR. PETERS' PATHOLOGY.

MY DEAR DOCTOR,

In your valuable journal, No. 7, Vol. 3, I find a paper entitled "*A review of the late reforms in Pathology and Therapeutics, by Dr. J. C. Peters,*" which, in my judgment, should receive some little notice in the next number of the Examiner.

I read this paper several times before I could see clearly what object the writer had in view. However, I was enabled finally, to get at the marrow of the thing; which was, to demolish Hahnemann and Homœopathy, and glorify Dr. Peters. I wish it understood, that if this can be done fairly and truly, I have no objections.

The Doctor is too late in urging the study of "Anatomy, Physiology and Physiological Chemistry, Morbid Anatomy, Pathology and Pathological Chemistry;" others have done it before him; and, it has been regarded long since, a serious imperfection in any one of the medical profession to be ignorant of these branches of science. Even Hahnemann, whom Dr. Peters thinks "one-sided" in his views, says; "It is solely the morbidly affected vital principle which brings forth diseases." In speaking of morbid causes of disease, he says: "They begin by disordering the organs of the vital energy, and the modified existence which is the result,—the dynamic change which ensues,—induces a change in the manner of feeling (uneasiness, pain,) and in the manner of acting (anomaly of the functions) of each organ in particular, and of the entire organs, which must necessarily also induce a change in the fluids with which the

vessels are filled, and produce morbid secretions. These unusual or anormal substances, then, which manifest themselves in diseases, are only the products of the disease itself—they must necessarily be secreted as long as the disease maintains its true character, and thus they form part of its symptoms." He also speaks of the organs and their functions, and "internal changes" of the human body, all of which, and much more, according to Hahnemann, are to be duly considered by the true Physician, in every case of sickness. To do this, will "equally force the study of rational, physical and chemical signs of disease." Therefore Dr. Peters fails in his first paragraph by insinuating that Hahnemann's system renders the above branches of science useless. The fact is they are of no use to that Physician, who bleeds, blisters, purges and pukes every case of sickness under his care.

The school which Dr. Peters would seem to favor, and in which pathological anatomy is fully "glorified," in the language of Hahnemann, imagines it to be the duty of a Physician to invent "systems by stringing together empty ideas and hypotheses upon the immediate essence of life, and the origin of disease in the interior of the human economy, and to confound the whole in unintelligible words and pompous observations which make deep impressions on the minds of the ignorant."

I will now take a look at the second paragraph. Dr. Peters has evidently made up his mind to "suffer some," by being, among other things, looked on as "fidgety and crochety," because he thinks he may "agree with one party in some respects, and with another in others." It is, however, a fact, that he does not agree with Hahnemann in anything essential to his system.

I really have feeling for Dr. Peters on account of his position. He is not among the Allopaths, nor is he with the Homœopaths; he has taken a *betweenly* position, which is a

striking illustration of his views of *similia similibus curantur*. Allopathy is on the one hand, and Homœopathy on the other; and, he says, I like you both, gentlemen. I know you don't like one another, and are apt to quarrel; but this comes of the imperfections of your respective systems. They are good and they are bad. I will be the umpire between you. I will show each of you what is true and what is false, and as the "common centre," I will very soon enlighten you and the world, and ultimately so exact shall the healing art become, that nobody will die.

Dr. Peters' remarks on the "*Materia Medica Puræ*" of Hahnemann, are hardly worth a notice. I venture the assertion that no one acquainted with that work ever heard the "shrieking of science" from it, but Dr. Peters. His notions, however, of what constitutes science in a *Materia Medica*, may be very different from my own, and consequently he may have heard her shrieks and saw her writhings in the hands Hahnemann, for the Doctor declares most positively, that "science shrieked."

There is a palpable misrepresentation which deserves a severe rebuke. It is in these words: "we sincerely pity the physician who will know nothing else than Hahnemann and his *Materia Medica*, and them glorified." After making this stab, he proceeds to heal up the wound with fulsome flattery.

The remarks of the Doctor on *similia similibus curantur* are altogether of a speculative character, which, by the way, is almost true of the entire paper. He places this principle between *identity* and *opposite*, and calls it "*difference*," by which he has accomplished two things. First, instead of *similia similibus curantur*, we must say "*difference*," changing the name. Secondly, he has given it a location, which is fixed exactly between "*identity*" on the one hand, and "*opposite*" on the other hand. And, having thus arranged the name and the place, he next goes on to make this

"common centre," very neighborly with *identity* and *opposite*. He (Difference) helps them whenever they call upon him. For example, when "*identity*" finds himself aggravating a diseased organ, he invokes the aid of "*Difference*," who very soon produces a "*change*." So also when "*opposite*" gets into trouble, he also calls for the aid of his neighbor "*Difference*," and peace and harmony are quickly restored. Now, my dear Doctor Hull, is not this beautiful? I wonder if this "*Difference*" is not the *vis medicatrix nature* on which Allopathic physicians depend for the cure of all diseases, believing as they say, that she is the greatest Doctor in the world, although she cannot cure a wound without leaving a scar, and thereby showing herself to be somewhat of a bungler at the "trade," notwithstanding the laudations bestowed upon her. As I have thus digressed, I will only add that if "*nature*" is such a good Doctor, why do we not allow her to monopolize the whole business of healing?

As for myself, I have no confidence in "*nature*" as a Doctor; I have seen her kill a great many in my day; and had not this truth, that "*nature*" is incompetent to cure diseases, been impressed on the minds of physicians generally, they would never bleed in inflammations.

In conclusion I have only to say, that Dr. Peters seems to suppose that the healing art can and ought to become an exact science; which can never take place. Life, itself, is only known to us empirically. We acquire a knowledge of disease in the same way; and the same method is adopted in the cure.

Hahnemann urged that nothing should be believed but what was the result of careful experiment; and the doctrines he advocated were the result of experience. Therefore, the only method that can be employed to demolish Homœopathy is to experiment as did its founder. All the speculations of every speculative

mind in the universe can never prove untrue what Hahnemann has said of the principle *similia similibus curantur*, in its application to the cure of diseases. For this reason, it is made known by experience, as are all the essential doctrines which he taught. The same remarks will apply to his *Materia Medica Puræ*, it is entirely made up of facts, and, however inconsistent these may seem, yet reason is incapable of proving them either true or false. His experiments must be repeated, and these only can test their truth or falsity.

Finally, I deeply regret that Dr. Peters ever allowed the "Review," &c., to be published; it has done him no credit. It contains a very brief history of a few facts, with which every physician is familiar; and the rest is all speculation, of no use to any one. Although I have indulged in a little commonplace in what I have written, I have at the same time, no unkind feelings towards Dr. Peters. I am the last man to place anything in his way to eminence in his profession, and will be the first to acknowledge and rejoice at any new *fact* he may contribute to increase our stock of information. But, the Doctor seems to have an itching for Bookmaking, which the sooner he is cured of in this incipient stage of his professional career, the better, especially if this, his first effort, is an indication of what may follow.

I am, Dear Sir, very respectfully,

Yours,

S. R. KIRBY.

New York, 1843.

HOMŒOPATHIC LITERATURE.

41. Handbuch der Homœopathischen Arzneimittellehre u. s. w. bearbeitet von Dr. Alphons Noack, in Leipzig, und Med. Rath Dr. Carl. Friedr. Trinks in Dresden.—*Fünfte Lieferung*. Leipzig, 1843.

T H E

HOMŒOPATHIC EXAMINER.

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VOL. 3.

PARALYSIS OF THE FACE,

SUCCESSFULLY TREATED,

WITH

STRYCHNINE.

BY

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I have employed Strychnine in two cases of paralysis of the muscles, supplied by the portio dura, called by Bell the respiratory nerve of the face. Though this affection does not endanger life, it is extremely inconvenient, and occasions great deformity. One of these cases differed in some respects from any which I have met with in books. It was an uncomplicated paralysis of the portio dura on both sides. In the numerous cases given in the appendix to Sir Charles Bell's elaborate work on the nerves, there is but one case of paralysis of both sides of the face, and in that the affection of the portio dura was complicated with that of other nerves. Paralysis on one side of the face has been frequently observed; and although many cases have yielded to depletion, counter irritation or mercury, others

have obstinately resisted these older remedies. Strychnine has of late been employed with advantage; but the modes and laws of its action seem to have been but imperfectly investigated. The following cases may contribute something to the stock of observations necessary to elucidate these subjects, whilst at the same time they corroborate the physiological doctrines of Bell, in regard to the functions of this nerve, as having no influence in sensation and as being the common source of power to all the muscles of expression, whilst the branches of the fifth pair supply the muscles of mastication, and confer common sensibility.

CASE I.—*Paralysis of both sides of the face.*—*April 17th, 1840.*—A young man, W. H. L., had been for the last four days unable to shut his mouth, except by means of his fingers, or by the impulse of the air against them during a forced inspiration. This was the defect which appeared to give him most concern, as it affected his speech. Of course, he could articulate no words containing labial letters. From this circumstance, and the expression, or rather total want of expression—of his face, I immediately perceived that there was a paralysis of all the muscles of the face which were supplied by the portio dura. Those supplied exclusively by other nerves were wholly unaffected. He had perfect control of the tongue and of the masseter, temporal and other muscles specially appropriated to mastication. Still one difficulty existed in this op-

eration, viz. : an inability to keep the food properly between the teeth. This was to be anticipated, inasmuch as the buccinator, employed in this office, is also connected with the function of respiration. The patient was wholly incapable of smiling or frowning, or closing the eyelids, from paralysis of the zygomatici, corrugator supercilii, orbicularis palpebrarum, &c. When I requested him to close his eyes, the lower lid did not rise at all, but the eyeball rolled extensively upward under the upper lid, which descended a little, when I requested him to direct the eyes steadily toward me. Whilst attempting to shut them he found it impossible to cover the cornea.

As the paralysis affected both sides of the face, but did not extend beyond it, I inferred that the disease had originated neither at the origin, nor in the course of the nerve, but at its organic extremities, and probably in consequence of an application of lead to the mouth. The patient's answer to an inquiry on this point tended to confirm this suspicion. I learned that he was a printer, and had been holding types in his mouth, when at work as a compositor. He had formerly done so, but on learning that printer's types were poisonous, had until within a short time previous, nearly discontinued the practice. He was at this time perhaps more predisposed to the affection, in consequence of some exposure to cold a few days before, and of previous general debility for some months, induced partly by an exhausting hemorrhage from the leg.

Treatment.—A cathartic was directed, and the application of tincture of strychnine to the cuticle of the face—about one drachm of a solution containing about three grains of strychnine, to an ounce of alcohol, was applied to each side three times a day, and the absorption assisted by friction. This lotion sometimes produced a little twitching of the muscles, fifteen or twenty minutes after its application; and under its use the muscles of the

face completely recovered their power in two or two and a half months. At the end of one month, the application to the left cheek was discontinued, as the muscles on that side had completely recovered. On the opposite side, the corrugator supercilii, and muscles of the mouth were more benefitted, by the first month's treatment, than the orbicularis palpebrarum. For complete recovery, this side required at least twice as much time as the opposite side of the face.

CASE II.—Paralysis of one side of the Face.—Mrs. H. aged about forty-five, became suddenly affected with great distortion of the face, some time in March 1840. The paralysis had been, during three weeks, preceded by pains on the same side of the face, and, on some previous occasions, pain in the corresponding ear. The patient was not seen by me till the 28th of May. There appeared to have been no tendency to a spontaneous recovery of power by the paralyzed muscles. The sensibility of the parts had not been affected.

Symptoms and Pathology.—In this case of paralysis of one side of the face without loss of sensibility, the affection as in the former case, was entirely confined to the muscles of expression. Here it involved only those on the right side of the face. The opposite angle of the mouth was drawn up, always half an inch, frequently three-fourths above that of the affected side, but to a much greater distance in the actual direction of the displacement, i. e. upwards and to the left. The patient, on being asked whether she could close the right eye, seemed incapable of deciding, but made the attempt, and then asked whether it was shut. The reason of her uncertainty was obvious. The pupil was turned up under the upper lid, which was not depressed but left the sclerótica exposed. This evinced paralysis of those branches of the portio dura

which supply the muscles of the eyelids, as the obliquity of the mouth had of those which supply its muscles. She complained that the eye was irritable, and the lachrymal secretion increased. This was evidently a consequence of the eyeball's exposure to the air, and another evidence of the paralysis of the muscles.

To test the paralysis of the buccinator, I requested the patient to blow. During the attempt, the cheek of the affected side was puffed out into a hemispherical shape, whilst the other side, in which the buccinator retained its activity, remained comparatively flat. I find this can be imitated by a voluntary effort. We can cause one buccinator to resist the pressure of the internal air, and allow the other to yield passively to the distending force. When the buccinator is seen tense, this is no evidence of its activity. On the contrary, with a given pressure of the air, the tension is the greatest when the muscular force is reduced to nothing; for then, in consequence of the dilatation of the cheek, the distending force acts upon the greatest surface.

Effects of Strychnine.—On the 29th of May, 1840, about two months after the attack, the treatment with strychnine was commenced. The distortion of the features was great, and, according to the representations of the patient, there had been no amendment during this time. I directed the internal administration in doses of one sixteenth of a grain, morning and evening. The effect of that taken on going to bed, was manifested in a few minutes; that in the morning produced no sensible contractions. It is a fact of some interest, that this agent is not only determined specially to the muscles, but the effect is chiefly manifest in the muscles of the affected side. This I had learned in a previous case. But it would be interesting to know whether, in a partial paralysis, the healthy or unaffected muscles of the affected side, are more liable to the influence of the strychnine than those of

the opposite side of the body. The facts of this case favor the affirmative. The action of the medicine was manifested by a sense of drawing in the muscles. This, during the early part of the treatment, commenced simultaneously in both wrists, and extended progressively up the arms; but on the sound side never so high as the elbow. On the side corresponding to the paralysed muscles of the face, it extended at first to the upper arm, still later, *i. e.*, on subsequent days, to the neck; whilst as yet its influence on the paralyzed muscles was not manifested by any sensible contractions. About the same time at which these commenced in the affected muscles, they ceased to be reproduced in the healthy muscles, which were not affected with spasmodic contractions during the remainder of the treatment. Thus the sanative influence of the agent seemed to approach by successive steps towards the seat of the disorder, and there to concentrate itself, having first quitted the healthy side of the body, and then those parts of the affected side more remote from the seat of the affection. It never at any time moved the legs.

The external application of strychnine in this case produced but little effect. The complaint, which had been much relieved by a week's internal use, was but little relieved by a continuance of that, by the external application, or by pustulation near the exit of the portio dura, with tartrate of antimony. It remained stationary.

After some suspension of treatment without any spontaneous amendment, the internal use of strychnine was recommenced in increased doses on the 21st of July. One-eighth of a grain was administered at bed-time. In about ten minutes it caused a transient action in some of the muscles of the ear. But the most remarkable effect of this dose, was a sudden and powerful contraction of the paralyzed muscles of the mouth, thirty-six hours after

the administration of the medicine. After the transient contraction of some little muscles of the ear, there was no sensible manifestation of the action of the medicine for thirty-six hours, *i. e.* till half past nine of the morning of the second day. But now the patient was astonished to feel the mouth suddenly drawn far to the right, and wondered whether a new and permanent distortion of the face had occurred towards the side opposite the former. A transient distortion had indeed occurred in consequence of an action of the paralyzed muscles so powerful as to overbalance that of their healthy antagonists. Two other similar doses, at intervals of two days, produced no manifest contractions.

The above phenomena, and some subsequently observed, suggested some topics for investigation, *viz.* : the length of time during which strychnine acts, the effect of a second dose during this time, and the most advantageous intervals between the repetitions.

On the evening of August 3d, the internal use of the medicine was resumed in the same doses, to be repeated after the same intervals. The first dose produced no manifest contractions. In consequence of the patient's mistaking the directions, the second dose was taken on the very next evening. In about fifteen or twenty minutes it produced strong action near the posterior part of the jaw on both sides. The sensation was represented as resembling that painful sensation near the articulation of the jaw which sometimes attends the act of gaping. About an hour after taking the medicine, the patient having occasion to rise and walk across the room, discovered that the muscles of the feet and legs had nearly lost their power. The next day, however, she had her usual strength, and it was manifest that her face had improved.

In order to prevent the repetition of disagreeable effects, as well as to throw light on the topics above-mentioned, I directed the

doses to be now repeated at intervals of four days. At some time in the night succeeding the expiration of two days after the next dose, the patient experienced for about five minutes a strong and peculiar cracking sensation of the affected side of the face. She described it as resembling that which might attend a sudden separation of the parts in a straight and vertical line extending from the temple to the base of the jaw. On the next morning the affected side of the face was considerably œdematous. Suspecting this might be in part the result of the medicine, I determined on a reduction of the dose to one-sixteenth of a grain, still preserving the interval of four days. The first pill was detained in the throat, and was partly dissolved by the saliva before the deglutition was completed. It acted within two or three minutes. The sensation was represented to be in part that of a kind of crepitation, almost wholly confined to the affected side of the head, and comprehending the ears, face and scalp to a considerable extent. Having occasion to rise to attend to an infant an hour and a half after taking this small dose, the patient found her legs quite weak. Next day, however, she felt better than usual. The patient, after taking two more doses of this size, one every fourth evening at bed-time, left town on the 21st of August. Each dose produced within a few minutes, contractions of the muscles on the affected side of the face, but none on the following days. There was a gradual amendment. The eye at that time could be almost perfectly closed. This restoration of the power of the orbicularis muscle had been followed by the removal of that irritability of the eyeball which had been occasioned by its exposure. The deformity of the mouth had been nearly removed. The buccinator had been less affected by the medicine than the other paralysed muscles, and its action, though improved was still defective. The treatment with

strychnine has been employed about two months, exclusive of one month's intermission. The patient carried with her two-dozen strychnine pills, one sixteenth grain each, with the use of which the cure was rendered complete.

Remarks on cases compared.—It may tend to throw some light on the mode of action of the above remedy, to state some coincidences observed in the above cases, and in one of hemiplegia treated for a short time, but with less success, during the same year. Here the disease affected the portio dura in common with other nerves, and appeared to be peculiarly sensitive to the therapeutic agency of strychnine; and the improvement produced by it in the functions of this nerve remained for months after the discontinuance of the remedy, and when the limbs, which had received less even of temporary benefit, had totally relapsed into their former helplessness. The transient effect of the medicine occurred in from half an hour to an hour, but on some occasions spontaneously recurred about nine o'clock on the following morning, and at others, about nine o'clock on the morning of the second day, (*i. e.*, in thirty-six hours after the administration,) but never at other hours. Thus there is a curious coincidence as to hour of day and interval in this as compared with one of the above cases. Can there be any special tendency in the action of this agent to recur at nine o'clock in the morning, or after twelve or thirty-six hours after its administration, and is its primary action more manifest in the evening?

That the respiratory muscles were influenced by the medicine, was shown by an involuntary cough, and a sneezing which generally occurred simultaneously with the spasmodic contraction of the muscles of the extremities. These last acted chiefly on the affected side.

It is possible that some light may be thrown on the subject of the apparent special determination of the action of strychnine to affected

muscles, by some facts noticed in this case. When the spasmodic action came on, whilst the patient was sitting in his chair, with his arm but slightly flexed, and his leg much more flexed, he noticed that at the instant of the spasmodic action, the forearm always became flexed, and the leg extended, the latter more powerfully. Why this special influence on the extensors of one limb, and the flexors of the other? It will be perceived that the action, both in direction and intensity, had some relation to the previous position; and it was subsequently ascertained, that whether the action in either limb was flexion or extension, depended on its previous position. If much flexed, it became extended, if extended, flexed. Should the same results be observed in other patients, it might perhaps, enable us to advance one more step in the explanation or generalization of the special influence on paralyzed muscles. The spasmodic contractions are more readily excited in muscles relaxed by paralysis than in those which are in the normal condition. If this special determination of action is due chiefly to previous relaxation, we might expect it to be oftener manifested in the more relaxed than in the more tense condition of the muscles, whether this relaxation had originated in paralysis, position, or volition.

It may be proper to state some experiments made on this patient which were suggested by accident, and which have a bearing on some interesting points of the theory of muscular action, if not upon those points of it involved in the above discussion.

The experiments were suggested during the application of powdered strychnine to a portion of the instep, from which the cuticle had been removed. But I will first take this occasion to state, that as a therapeutic experiment, it was unsuccessful. Though the application was made rather freely to the dermis of the anterior part of the ankle and of the top

of the foot denuded by successive epispastics, there was no appreciable effect; and I was induced to suspect the endermic method to be inferior both to the internal use and to the cuticular application which some have denominated the intraleptic method.

On a certain day, as I was pouring from a paper the powdered strychnine upon the anterior and upper part of the foot, the paper came accidentally in contact with the sensitive surface of the blistered part, whose sensibility, like that of every other part had been unaffected by the disease. The muscles of the limb, over which neither the action of the powder nor the volition of the patient had been for some time able to exercise the slightest control, were instantly called into forcible action by the first contact of the edge of the paper. The foot was thrown upwards, chiefly by the extensors of the leg. The paper was kicked and its contents scattered.

The potency of mechanical irritation is of much less interest than the direction of the motion. On this subject I made repeated experiments on two opposite portions of the surface of the foot, which always resulted in producing a motion towards the irritated part, a motion chiefly due to the extensors and flexors of the leg situated on the thigh, and of course at a great distance from the part directly irritated. Although the patient was incapable of moving the foot by a voluntary effort, it was invariably and involuntarily thrown upward by mechanical irritation applied to the vesicated surface on the upper side, and as invariably drawn downwards and backwards by titillation of the sole or plantar region. Thus, irritation of the surface opposite one of the extensors of the toes, the extensor brevis digitorum pedis, called into action the extensors of the leg, whilst irritation of the surface opposite one of the flexors of the toes, the flexor brevis digitorum pedis, called into action the flexors of the leg.

CLINICAL LECTURE ON HOMŒOPATHY,

BY P. F. CURIE, M. D.,

LONDON.

SCARLATINA.

Scarlatina, or *Morbilli confluentes*, *Rubeola rossalia*, *Febris scarlatina*, *Febris rubra*, *Purpurea*, or *Enanthesis rosalia*, is an eruptive febrile disease, characterized by broad spots slightly elevated above the surface of the skin, of a scarlet red color, and of which the eruption is always preceded by gastro-intestinal phlegmasia, and often by pharyngitis.

Causes.

The nature of the causes of scarlatina is yet but little known; observation has only led to a knowledge of this fact, that they are of two orders, the occasional and the predisposing.

It is generally believed that the occasional cause belongs to a peculiar state of the atmosphere, or to certain miasma escaping from the earth; this opinion was suggested by the observation, that this disease broke out towards the time of the equinoxes, in winter during atmospheric changes, or when the weather is damp, cold, and cloudy; and, again, in other seasons, after copious falls of rain, immediately followed by great heat, or considerable heat accompanied by heavy showers. Cases of scarlatina are, nevertheless, found at all periods; but the epidemics only occur at the epochs which we have mentioned, and generally spring causes them to disappear. This miasmatic cause, transmissible from one person to another, renders the disease contagious, although to a slighter extent than the measles.

The second order of causes is already bet-

ter known ; it relates to the person individually, and places him in such a disposition as to render him more susceptible than any other person of acquiring scarlatina, or it tends to complicate the disease by the exhibition of peculiar and aggravating symptoms.

Thus, all are not in the same degree liable to take the scarlatina ; neither are all conditions equally propitious to its development : it more frequently affects women than men, childhood and youth than mature age. Generally, it attacks the same person but once ; and there are but few exceptions to this law of eruptive diseases.

We might discourse at greater length on the nature of the causes, and on the causes themselves ; but having imposed on ourselves the rule, to state nothing before we have derived sufficient proofs from repeated experiments, we will await the moment, when some ultimate experiments, such as cures of certain blindnesses, resulting from scarlatina, and unattended by any other symptom to serve as a guide—cures which we are at present almost certain of effecting ; when these shall have brought us convincing evidence that we are in the right, not until then shall we render public, both our trials and their results.

Symptoms.

The symptoms present three perfectly distinct periods.

The first is when the persons affected complain of cephalalgia, weariness of the limbs, shiverings, dejection, pains in the back, derangement of the appetite, nausea, and vomiting. The face appears to be sunk in ; the tongue is loaded towards the centre, and red all around and at the tip ; the skin is hot ; and sometimes epistaxis is observed.

These symptoms gather strength in the evening, and at night. In certain cases there is a perturbation, and even delirium, more or less marked ; the eyes are red, shining, and moistened.

At other times this period of the disease is so slight, that little notice is taken of it ; one might almost say that the disease arises in the second period or that of eruption, which generally shows itself on the third day of the febrile state.

2. At this period the face becomes visibly more or less swollen : small spots, slightly raised, which at first are of a slight, but later of a bright red, separated by intervals, in which the skin retains its natural complexion, appear in large numbers on the face, neck, and chest.

In the space of twenty-four hours, similar red spots show themselves over the whole body, on the lips, tongue, palate, and pharynx ; then the greater part of the interstices, which the primitive marks had left between them, have disappeared. The exanthema becomes continuous on the cheeks and limbs, and assumes the color of scarlet. The spots are irregular, indented at their edges, and apparently dotted in their surface ; the papillary elevations are often found extending over the hands, chest, and limbs.

As soon as the redness of the skin has acquired the depth of scarlet, the disease is fully characterized, and the eruption is completed in a short time. The skin is very hot, often dry and burning, pruriginous and painful to the touch ; its surface, usually smooth, becomes rough, like shagreen, especially in certain places at the outer and posterior part of the arms and thighs.

The feet and hands, where the redness is commonly of the deepest hue, are swollen, stiff, and painful. On the groins and buttocks, in the bends of the articulations, this red is of greater intensity and tenacity than on the other regions of the body. The exanthema, weaker in the morning than at night, always becomes deeper in the evening, especially on the third and fourth day.

Sometimes it is attended with nausea and

vomiting, diarrhœa or costiveness, coriza, a guttural sound in the voice, dry cough without expectoration, bleeding at the nose, oppression in breathing. The fever remains after the eruption, and in severe cases it is even more strongly perceptible than before the appearance of the exanthema; when that occurs, the inflammatory symptoms of the pharynx and amygdalæ are often very serious; the tongue exhibits a tint peculiar to scarlatina, being of a smooth and excessively deep red; sometimes these symptoms improve as well as the fever, when the eruption is complete; the same has been observed with reference to the digestive canals.

3. On the fifth day the disease enters into the third period, when the eruption begins to lose its color, the redness quits the affected parts in the same order in which it had first appeared, the swellings of the face subside, and the interstices which divided the spots become wider. On the seventh day the scarlet color is faintly distinguishable; at first a slight desquamation accompanied with itching takes place on the face, the temples, neck, and breast; and one or two days later broad epidemic lamellæ detach themselves from the surface of the skin on the hands and feet, the fingers, and other parts of the body.

Towards the termination of the eruption, the disease presents sometimes a sufficiently remarkable anomaly; a febrile movement appears, and the skin becomes covered with new red spots, less intense, but resembling those of the first eruption: these accidents quickly disappear after a greater or less degree of perspiration.

Such are the symptoms of scarlatina, its development and its progress; but the circumstances which bear upon the patient, his previous state of health, the power or slightness of the cause of the infection, may vary to such an extent, that the disease shall undergo very serious modifications. To this we

must attribute the fact, that the disease has been described by divers authors under such different features, according to the view they took either of a mild epidemic, a simple case, or a separate case seriously complicated, or a more malignant epidemic. In itself still is the disease the same, presenting more or less intensity, and complicated with other diseases which are not essentially connected with scarlatina, but which are often awakened by the cause that has produced it. Thus for instance, a psoric state of the constitution may breed the most dreadful disorders, while healthful persons are but slightly affected by the same epidemic.

In persons living in either unwholesome or marshy situations, given to excess of drink or exposed to violent fatigue, undergoing the sudden changes of temperature, we observe:

1st. Sometimes dreadful inflammations of the skin, with phlegmonous erysipelas which is almost universal, and quickly becomes mortal; this inflammation is sometimes so powerful that it produces a fatal state of gangrene.

2nd. Rapid congestion; apoplexy with effusion of blood in the meninges.

3rd. Predominance of gastro-intestinal phlegmasia, which often degenerates into a typhoid disease, when the intense redness begins to disappear, or else the acute intestinal disease remains in a chronic form.

4th. Under the affection of cold, we behold phlegmasia invading the bronchia, this parenchyma pulmonaris, or the pleura; inflammations, that more or less rapidly cause the death of the patient, or slowly draw him on to the grave by the chronic prolongation of the disease.

5th. Violent membranous and gangrenous inflammation of the throat.

6th. Eruption of sudamina, severe chronic, cutaneous affections, irritation of the skin, and disposition to furuncles.

7th. Inflammation of the veins.

8th. Effusion of blood in the cellular subcu-

taneous tissue, and in the skin itself, the vessels of which appear to transform themselves into blood vessels. This complication is especially observed in armies, during cold seasons and when the soldiers have indulged in excesses; added to it, are observed serious cases of gastro-enteritis.

9th. During the convalescence from the fourteenth to the fifteenth day, sometimes later, one may observe a certain anasarca deserving of particular notice.

This dropsy occurs most frequently in winter, and in children exposed to the effects of cold. It indicates its presence by a feeling of fatigue, languor, sadness, disgust, by absence of sleep, and by the paucity of urinary discharges, which become thick, brown, blackish, and sometimes not unlike water in which flesh had been washed; the face, the eyebrows in particular become swollen, and the œdema reaching the lower extremities soon overruns the whole body.

Pathological Anatomy.

In some few cases the corpses present to observation cellular and cutaneous tissues replete with blood, which flows abundantly at every incision of the scalp.

Generally there are found traces of phlegmasiæ, of sanguineous and serous effusion and infiltration, wherever the symptoms of vital erethismus have been predominant, even in the vascular system; which caused Broussais to affirm that it was entirely a disease of the blood, with serous infiltration around the parts that are gorged with blood. The indications of phlegmasiæ are often to be remarked in the gastro-intestinal canals, comprising the pharynx, in the aerial passages, and the meninges; the brain is often surcharged with blood. We frequently meet with suppuration in the amygdalæ, as well as in the submucous cellular tissue of the upper part of the larynx.

If the patient die within the first septenary, it is not unusual to find no anatomical injury of importance as the manifest cause of death.

Diagnosis.

To determine rightly the diagnosis of scarlatina, we should be well acquainted with the difference that exists between this disease and the measles.

Scarlatina differs in its forerunning symptoms by signs of *pharyngitis*, more or less violent, joined to those of *gastro-enteritis*, that are, with very slight differences, the same as occur in the invasion of the measles. The eruption peculiar to scarlatina is broader, and of a deeper red than that of the measles: *ophthalmia* and *coryza* are not found in scarlatina, and seldom is there any cough. According to M. Heim, scarlatina has a characteristic odor, which he compares to that emitted, at some distance, from the dens where lions or other beasts of prey are confined. This smell is perceptible from the outset of the malady, even before the appearance of *exanthemata*. The measles possess also their peculiar odor, but it is widely different. From the beginning to the seventh day it is sweetish; then it becomes rather sour, and bearing an exact resemblance to the smell emitted by quills, fresh pulled from a goose alive or recently killed.

Prognosis.

Since first we arrived here, to consecrate our labors to England, we have heard so much said of the fatal terminations of scarlatina, during a time when (especially for this disease) our practice was proceeding with the happiest success, that we have felt the necessity of treating the prognosis under two different points of view. Effectively, as there are two modes of considering the disease, so must there be two methods of determining the prognosis.

If we assert, according to the ancient data, that, as the symptoms constitute the disease itself, the administration of medicine is required to counteract those very symptoms; then shall we say, under however benign an aspect the disease appears, it may be fraught with danger; as much on account of the complications which may arise, as of the successive diseases.

What prognosis can be pronounced if from the outset there is an appearance of complication? Then, one must take exact information of the degree and extent of the complicating *phlegmasia*, whether *pharyngeal* or *gastro-intestinal*, *pulmonary* or *cerebral*; these will influence the prognosis, according to their own degree of importance, and that they are about to receive a proportionate antipathetic treatment. In these cases the *hæmorrhagic*, or so-called nervous scarlatina, is almost always mortal.

But if, on the contrary, remembering that which we have said, that which we are daily demonstrating—namely, that symptoms, far from being the disease, are the expression of the vital re-action rising against the morbid influence, and acting with the intent of procuring the health of the diseased person—that we have it in our power to prescribe medications in favor of, that is, in the same direction as those very symptoms and the primitive force which, actuating the organism, caused them to be produced: then shall we say that scarlatina can only assume a serious aspect when an important psoric state has formerly attacked the patient, and adhered to him up to the moment of the present disease. But then it is not the scarlatina itself which is to be feared; for, even in these circumstances, if a previous anti-psoric treatment has taken place, and that the patient submit strictly to the advice of a skilled Homœopathist, no fatal termination is to be foreseen.

With regard to the simple scarlatina, no

greater danger need be apprehended from it than from any other disease of childhood.

Some may, perhaps, be astonished at hearing us advance an opinion so diametrically opposite to those generally received. Formerly, when following the practice of allopathy, we were unacquainted with the directive law of the application of medicaments, we also entertained serious thoughts on the importance of scarlatina; but at the present day, after having obtained so many and such prompt cures of this disease, we cannot but be convinced that the prognosis must be almost always favorable, in the hands of one who is a skilful Homœopathist and a good practitioner. We will further add, that we hold an equal conviction, still founded on facts, that not only scarlatina, but a great number of diseases do not possess in themselves all the importance which is attributed to them. Let us also state that, whatever may be the inveteracy, whatever may be the intenseness, of dreadful symptoms afforded by diseases, all without exception are curable; unless, indeed, the assistance of art is not called in until the decomposition is so far advanced, that there remains but to create new organs, in which case it is beyond the power of art to avert death.

We have been called to attend on consecutive cases of scarlatina, and have almost always found them more difficult, and longer to cure, than similar cases which were only primitive. Why is this? We believe we can resolve this question; but we defer our explanation to the 'Analytical Treatise on Scarlatina.'

Treatment.

The organic mechanism, which produces the symptoms of scarlatina, will be readily understood. Over activity of the fluids, which proceed towards the secretories, causes an extra irritation in their functions, in order to

expel and cast out the morbid influence; consequently the treatment is one of the easiest to prescribe.

In the first period an exaggerated vitality prevails, more especially in the mucus of the digestive canals. The blood, borne on by the power of the miasma, seems so much hurried in the act of its circulation that, at the slightest arresting impediment, it breaks its bounds. From these interior actions result the general feelings of uneasiness, headaches, weakness, shiverings, nausea, vomiting, bleeding at the nose, &c., &c. As for this last symptom, it is usually considered as one of good omen, when occurring in the beginning of the disease; and this will be easily explained. The part of the blood carried towards the secretories is that which is most impregnated with the miasma that the organism is endeavoring to expel; and if one of these tissues procures the evacuation of it, there remains so much less for the others to combat.

What is the duty of the physician? Shall he endeavor to diminish the vital actions which arise to oppose the general disorganization, or shall he fortify them? The answer admits not of the slightest hesitation. He must choose a medicament, the action of which produces on the organism exactly the same symptoms as those offered by the actual reaction, then is he certain of acting in the same direction as the vitality; and after careful examination, we will give *pulsatilla*, from the 6th to the 12th dilution, to the amount of one or three globules.

But in case the fever should increase in the evening, and that there is absence of sleep, insupportable sadness, with tears, *ipecacuanha* will be the proper remedy; it must be given at the 3rd dilution, from one to three globules.

If the febrile movement is considerable, and preponderates over the other symptoms, you must begin by *aconitum*, from one to three globules.

In cases of very intense fever, one may prescribe one drop of a low dilution of *aconitum*; but these seldom occur: it is better, if a first dose is not sufficient, to administer a second, four, six, or eight hours after the first.

When the febrile movement does not indicate itself strongly, until after the administration of the *pulsatilla*, *aconitum* must be given, about six or twelve hours after this remedy.

In the second period, the dermoid tissue joins its action to the over activity of the internal secretories; it becomes infiltrated, and produces an eruption.

In this period it is easy to ascertain, by comparing the two symptomatologies of the disease and of the medicine, that *belladonna* alone can answer to all the indications.

It will therefore be necessary to prescribe it, from the 6th to the 24th dilution, in doses of one to three globules, dissolved in water, to be taken one spoonful every half hour, or at one draught, which we prefer, because it is easier to judge of the effect produced by the medicine; and it may be repeated twelve hours afterwards if the case requires it.

When the fever continues after the first day of the eruption, and that *belladonna* appears to have no influence over it, you must give *aconitum* in the same doses and dilutions as for the first period, and six or eight hours afterwards return to the *belladonna*, and so on, repeatedly alternating the *belladonna* with *aconitum*, according to the signs. *Aconitum* answers above all to the general movement of fever, and to the symptoms of violent local inflammation. *Belladonna* corresponds principally to the organic action of the skin, of the throat, of the aerial passages, of the eyes, also the cerebral symptoms. The action of this medicine is assisted by *aconitum*; this latter bringing so powerfully into play the system of circulation. Nevertheless, we would not advocate too great a reliance on *aconitum*; it cannot fill the place of *belladonna*, with regard to the eruptive movement.

One cannot determine the precise number of doses of *belladonna* which become requisite during the second period ; the practitioner, in following the general rules, should modify his treatment according to each particular case.

When there is a burning heat in the skin, drowsy somnolency, insufferable tossing about, with vomiting, diarrhœa, or obstinate constipation, in a few hours this state will yield to two or three globules of *opium*, from the third to the sixth dilution ; subsequently, the treatment should be continued according to the rules laid down previously.

The third period is scarcely anything but that of convalescence, *i. e.*, the instant of repose required by the organic system, after so great an exaggeration of all its vital powers. Here it is incumbent on the physician to watch the convenient regimen that may gradually bring back the patient to his customary mode of living. Yet, if the digestive functions were slow in resuming their appropriate physiological order, it would be necessary to administer either *pulsatilla* or *nux vomica*, according to the indications afforded by the symptoms. *Pulsatilla* is particularly indicated in subjects of the sort called the lymphatical, of a mild disposition, when the digestions proceed slowly, and more especially with difficulty for rich food, pastry, &c. *Nux vomica* is more useful with irritable persons, of a bilioso-sanguine constitution, possessing dry fibres, when constipation occurs.

If the symptoms of irritation of the mucous membrane were prolonged beyond the second period, there would be a sign of complication, and of new diseases to encounter ; these may be acute phlegmasiæ of the principal organs, such as the brain, the lungs, &c. You must refer for the treatments of these to the articles especially devoted to those affections. We can only mention here the treatment of anasarca, so often the consequence of an ill-con-

ducted treatment, or of the effects of a cold air to which the patient has exposed himself prematurely. When the symptoms indicate dropsy, or only a disposition to that disorganization of the liquids, it is necessary to have immediate recourse to *belladonna*, from one to two globules, of the 12th to 24th dilution ; this remedy must be followed up by *helleborus niger*, one to three globules of the 12th dilution, which may be repeated once, or oftener, according to the indication ; and, if the disease does not disappear under these regulations, recourse must be had to anti-psoric remedies. We refer to the article dropsy for the full treatment of this question.

Diet.

Every practitioner will understand that it is necessary, during the first two periods, to submit the patient to the strictest diet. If you commit the fault of granting the slightest nourishment, you are exposed to see the disease acquire suddenly the most serious and obstinate symptoms. The patients should also be recommended to be kept in an even, warm, temperature ; as the impression of cold at these epochs may occasion death. In the third period you must proceed very slowly in the administration of food, choosing first among the lightest ; such as broths of mixed meat, chicken and beef, veal and mutton, &c., (but the first are to be preferred) : a little later, add to the broths a little sago, vermicelli, tapioca, &c., &c., which must be boiled long in these juices of meats ; afterwards, you may alternate these broths, with the addition of one or two spoonfuls of jelly of those same meats ; lastly, you arrive by degrees to a cutlet, the wing of a chicken, &c., &c. For drink during the treatment, you will allow toast and water, or pure water ; later, a little sugar, or gum with it. During the convalescence, you must positively forbid wine, and recommend to the patient only to return to it by degrees after

his cure ; the same may be said of tea, which, if not guarded against, may occasion the translation into chronocity of the phlegmasia of the mucous membrane of the stomach.

Prophylactic Treatment.

When scarlatina reigns epidemically, the propagation of the infection may be stayed by submitting all persons living in the heart of the epidemic to a preservative treatment.

Belladonna must then be given in doses of two or three globules, every second or third day during the whole duration of the infection, and choosing the lowest attenuations. We have noticed, in many cases, some persons to be completely guarded against the evil ; others to have been attacked by very slight scarlatinous eruptions, proceeding rapidly and leaving no traces behind them.

The venerable father of Homœopathy, Hahnemann, having ascertained that in an epidemic of scarlatina, the children and adults, to whom *belladonna* had been administered, had been free from the disease, although they had frequented persons who were attacked, several French and foreign physicians hastened to verify this assertion. In 1820, a violent epidemic of scarlatina having broke out at Gutersloh, none of the children who had taken the extract of *belladonna* were ill ; it was administered eight days consecutively. Hufeland has collected thirteen reports of different German physicians, which have confirmed this opinion concerning the preservative effect of *belladonna* in cases of scarlatina. Mr. Martin also gives faith to this preserving virtue. Mr. Ibrelisle, physician at Metz, has seen twelve children saved from the approach of scarlatina, while it attacked two-hundred and six others, in the midst of whom they were living. Dr. Velsen has given *belladonna* to two hundred and forty-seven persons, of whom only thirteen caught the scarlatina. The re-

sult of the investigations of Dr. Wagner, on the total of the epidemics, in which *belladonna* has been administered during the course of the disease, compared to those in which it has not been used, is that one child in sixteen was lost in the first cases, while one out of three died in the latter ; nor do we hesitate in saying, that not one would have been lost in the cases where *belladonna* was used, if the remainder of the treatment had been such as we have noticed above. Entire villages in Germany have been saved by taking *belladonna*. Nevertheless, in an epidemic of long duration, the daily use of *belladonna* might not be without inconvenience ; the effects of so energetic a remedy, even taken in small doses, must, therefore, be watched with due attention.

SCARLATINA—IPECACUANHA.

Cries and howling, anxiety and fear of death moroseness, desire for a number of things, without knowing exactly which.

Pale, earth-like, or yellowish color of the face, which is bloated, with livid circles round the eyes ; profuse secretion of saliva, tongue loaded with a white or yellowish coating, insipid or clammy taste ; adipsia ; great repugnance and dislike to all food. Nausea as if proceeding from the stomach, with copious accumulation of saliva, violent itching in the skin, and empty risings ; vomiting of drinks and indigested food, or else of bilious, greenish, or acid, or slimy, gelatinous matter ; vomiting with sweat, heat, fœtid breath, and thirst. Sensation of excessive uneasiness in the stomach and epigastrium ; sensation, as if the stomach were empty and flaccid. Sinking in the abdomen, aggravated in the highest degree by movement, and ameliorated by repose. Colic with agitation ; tossing and cries. Diarrhœa, with nausea ; colic and vomiting.

Turbid urine, with sediment like brickdust.

SCARLATINA—OPIUM.

Lethargy, with snoring and mouth open; eyes open and convulsed; face red and puffed; jaw hanging; loss of consciousness; difficult, slow, or also intermittent respiration; pulse slow, or even suppressed, and convulsive movement of the muscles of the face, of the corner of the mouth, and of the limbs. Corpuloglia during sleep. Burning heat in the body, with great redness of the face, anxiety, delirium, and agitation. Pulse generally full, slow and intermittent, or quick and hard; fever, with lethargic sleep; snoring, convulsive movements of the limbs; suppressed excretions, and hot perspiration; fever, with loss of consciousness, or delirium. Congestion in the head, with strong pulsation. Vomiting, with violent pain in the stomach and convulsions; painful sensibility, and inflammation of the stomach and epigastrium; abdomen hard and distended, as if in a tympanitis. Constipation obstinate; frothy and liquid stools, with burning pain in the anus, and violent tenesmus; involuntary evacuations.

Retention of urine, as if from inactivity of the vesica.

SCARLATINA—HELLEBORUS NIGER.

Paleness of the skin; leucophlegmatic swelling of the skin of the whole body; scaling off of the skin from the whole body.

Sleepiness, with the eyes half open, and turned upwards; tossing in bed.

Shiverings alternately, with shootings in the limbs; cold over the whole body, and especially in the extremities, in the evening after lying down; burning heat in the whole body, and chiefly in the head, with internal shuddering and shivering, without thirst; drink is disliked; nocturnal sweat towards the morning.

Melancholy taciturnity; excessive and almost killing anguish: indolence; obstinate silence. Dulness of the internal senses.

Stupidity, and want of reflection, with fixedness of look on one single point: it seems that the mind has less command over the body; the muscles refuse their office as soon as the attention is turned elsewhere.

Stupifying pain, and sensation of bruising in the head; pressive and numbing headache.

Pale and œdematous swelling of the face; forehead wrinkled. Nausea, sometimes with excessive hunger. Dislike to food, especially meat, green vegetables. Blackish green vomitings, with pain in the abdomen. Heaviness, fulness and inflation of the stomach. Sensation of excessive uneasiness in the epigastrium. Dropsical swelling in the abdomen. Clucking in the abdomen, especially on breathing deeply, as if there were water in that cavity. Diarrhœa, with pain in the abdomen, and nausea. Watery and frequent evacuations. Frequent desire to make water, with scanty emission. Deep colored urine.

Difficult respiration, as if from hydrothorax.

SCARLATINA—PULSATILLA.

Great desire to remain lying or sitting; pain, as if from a bruise in the bones of the extremities.

Coldness, shiverings, and shudderings, principally in the evening or afternoon; and sometimes with pale face, vertigo, and dizziness, pain and heaviness in the head, anxiety and oppression at the chest, vomiting of mucus; desire to lie down, and flushes of heat. Partial coldness and shivering principally in the back, arms, legs, hands, and feet, often with the head hot, or the face and cheeks red. Dry heat, principally at night, in the evening in bed, or in the morning, and often with attacks of anguish, headache, face red and bloated, or perspiration on the face, shivering on being uncovered, burning in the hands with swelling of the veins, lamentations, sighs and moans, profound or agitated sleep, and anxious and

hasty respiration, fainting fits, with cloudiness of the eyes, inclination to vomit, and loose evacuations. Pulse quick and small.

Pain in the head as if the forehead would split, or as if the head were light, compressed, or contracted.

Dryness of the mouth in the morning; offensive smell; tongue loaded with a thick coating of a greyish, whitish, or yellowish color; insipid, slimy taste, sweetish, acid, or bitter taste of the mouth and of the food; food appears either too salt or insipid. Want of appetite and dislike to food. Hunger and desire to eat, without knowing what. Complete adipsia, or excessive thirst, with moisture on the tongue, and desire for beer, or spirituous and acid drinks. Sensation of derangement on the stomach similar to that caused by fat pork or rich pastry.

After eating, nausea and risings, regurgitation and vomiting; inflation and pressure in the pit of the stomach, colic, and flatulence, headache, obstructed respiration, ill-humor, and melancholy.

Frequent risings, sometimes abortive, sometimes with the taste of food, or acid, or bitter, or principally after a meal. Nausea and desire to vomit, which are insupportable, sometimes extending to the throat and into the mouth, and unpleasant sensation as if a worm were ascending the œsophagus.

Vomitings, which are sometimes violent, of greenish, slimy, bilious, and bitter or acid matter. The vomitings manifest themselves with shivering, paleness of the face, colic, pain in the ears or back, burning sensation of the throat and borborygmus. Painful sensibility of the region of the stomach to the least pressure.

Constipation; loose motions also at night, and sometimes with colic and cuttings, shiverings and shudderings, and pain in the anus.

Pains in the loins and in the back, as if after having stooped a long time.

Pain as from a bruise, with a sensation of paralytic weakness in the bones and muscles of the thighs and legs.

SCARLATINA—BELLADONNA.

Skin—Swelling, with heats and scarlet redness of the whole body, or of several parts, chiefly the face, the neck, the chest, the abdomen, and the hands; red places, inflamed and scarlet spots on several parts of the body; sometimes with small, quick pulse, difficulty of respiration, violent cough, delirium, memory more vivid, desire to rub the nose, and pupils dilated; red scaly eruption on the lower part of the body.

Sleep—Attacks of somnolent drowsiness and of lethargy, drowsy sleep at night, with frequent waking and convulsive movements. Nocturnal sleepiness, sometimes with desire to sleep, and useless efforts to sleep, mostly in consequence of excessive anguish or great agitation. On sleeping, frequent starts with fright, groans, cries, startings of the limbs, carpolagy, aggravation of pains, talking, delirium, and continual, anxious, frightful, vivid dreams.

Fever—Attacks of fever composed of shiverings alternately with heat, or of shiverings followed by heat, with aggravation at night or in the evening; with absence of thirst or extinguished thirst. Dry, burning heat, often with swelling of the veins, pulsations of the carotids, heat, redness, and bloatedness of the face, burning thirst, agitation, furious delirium, and shiverings on being uncovered in the least. Pulse strong and quick, or full and slow, or small and slow, or small and quick, or hard and tense. Sweat with the heat, or after it.

Moral and Intellect—Great agitation, with continual tossing; inquietude and anguish, chiefly at night, and in the afternoon; sometimes with headache and redness of the face. Lamentations, groans, cries, and tears. Nocturnal delirium, delirium with murmuring. Ill-humor, irritable disposition.

Head—Confusion of the head, obscurity and state of intoxication ; vertigo ; fulness, heaviness and violent pressure on the head, chiefly on the forehead, and sometimes with dizziness, stupor, and sensation as if the cranium were going to burst. Sensation of inflation and pressive expansion of the brain ; sharp tractine and shooting pain in the head. Strong pulsations in the arteries of the head. Sensation of fluctuation in the head, as if water were in it. The pain in the head generally aggravated by movement, especially that of the eyes, by shaking, by contact, by free air and current of air ; they are mitigated by holding the head back, and by supporting it. Boring with the head on the pillow while sleeping.

Eyes—Eyes red, sparkling, and convulsed, or fixed, shining, and prominent ; spasms and convulsive movements of the eyes.

Face—Spots of a scarlet or deep red color on the face ; swelling of the sub-maxillary glands and those of the neck.

Mouth—Sensation of great dryness or real dryness, and choking in the mouth. Tongue red, hot, dry ; redness of the edges of the tongue.

Throat—Great dryness and burning in the throat and in the tongue ; inflammation and swelling of the throat, of the velum palati, of the uvula, of the tonsils ; suppuration of the tonsils. Painful and difficult deglutition.

Digestive Organs—Loss of appetite ; burning and excessive thirst ; inclination to vomit ; vomiting of food, or of mucous or bilious matter. Sensation of fullness and inflation in the stomach and in the epigastrium, principally after having eaten ; inflammation of the stomach and duodenum ; inflation and tentation of the abdomen, chiefly in the hypochondrium. Suppressed evacuation and constipation ; loose evacuations with desire to vomit, and pressive pains in the stomach ; involuntary evacuations.

Urinary Organs—Urine turbid, of a yellow

color, or brownish-red color ; red or whitish sediment in the urine.

Trunk—Pain as of dislocation, and drawing pains in the back, and between the shoulders.

SCARLATINA—ACONITUM.

Attacks of pain with thirst, and redness of the cheeks. Distressing sensibility of the body, and especially of the diseased part, on every movement, and on the slightest touch. Failure of strength and stability ; pain and cracking in the joints, principally of the legs. Rapid and general decay of strength. Attacks of fainting, chiefly in rising from a recumbent posture.

Skin dry and burning. Sleepiness from anxiety, with constant agitation and tossing. Startings in sleep.

Dry, burning heat, with extreme thirst sometimes, especially at the beginning of the disease, preceded by shiverings with trembling. Heat chiefly in the head and face, with redness of the cheeks. Shuddering over the entire body ; oppressive headache ; a disposition to cry ; low-spirited and contradictory. Shivering, for the short time that they may be uncovered during the heat. Cold over the whole body, with internal heat ; forehead cold, and tips of the ears hot ; or with redness of cheeks and pains in the limbs.

Pulse hard, frequent, and accelerated.

Great agitation, discouragement ; the least noise appears insupportable ; humor changeable ; at one time sad, depressed, irritable, and despairing ; at another time gay, excited, full of hope ; inquietude under disease, and ever despair respecting a cure.

Head compressed ; as if the brain was nailed up, principally in the heat of the room ; head as if bruised, with a sensation of bruising in the limbs ; blows and beatings in the head. Congestion of blood to the head, with heat and redness of face, or with a sensation

of heat in the brain; sweat on a shrivelled skin, and paleness of the face. Aggravation of the pain in the head by movement, by speaking, by rising from a recumbent position, and by drinking. Amendment in the open air.

Face bloated, hot, and red; or alternately red and pale.

Pain in the throat, with deep redness of the parts affected, and difficult deglutition; burning and pricking in the throat, chiefly in swallowing.

Taste in the mouth bitter or putrid: excessive and unquenchable thirst. Loss of appetite and distaste for food.

Bilious or mucous vomitings. Sensation of swelling; tension and pressure, as by a weight in the precordial region, and in the stomach sometimes, with difficult respiration.

Tension and pressure in the hypochondriac regions; sometimes with fulness and a sensation of weight. Painful sensibility of the abdomen to the touch, and to the least movement. Suppression of stools; loose, watery stools. Urine scanty, burning, deep red, and with a sediment of brick color.

Breathing, difficult, rapid.

Pain, as if from a bruise, in the back, and in the loins, and in the nape of the neck.

COFFEE AGAINST LEAD COLICS.

Dr. Joseph Kirschner relates the case of a young painter, who, while waiting for the medicines prescribed, took, according to the Doctor's directions, a cup of very strong Coffee every hour. After the second, a considerable amelioration took place: after the third, the patient had a hard stool, followed by a general perspiration.

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ON CONSTIPATION.

By DR. KALLENBACH,
OF BERLIN.

No. II.

BY JAMES M. QUIN, M.D.

STATE OF IRRITATION OF THE INTESTINAL CANAL.

If, as we have seen, atony of the rectum is frequently the cause of habitual constipation, we must admit that the same affection may be produced by an entirely opposite state, i. e. by an irritation. According to the ordinary physiological symptoms, the irritated intestine secretes a greater quantity of mucous, and thus renders the evacuation of the fœces more easy. We often see, accordingly, after irritation acting immediately on the intestine, or even by metastasis, that abundant diarrhœas show themselves, and no one has yet *satisfactorily* explained why irritants which seem analogous, cause, in certain cases, increased activity in the irritated organ (diarrhœa,) and in others, a diminution of the secretion (obstruction.) In a late work M. Chardon* has sought to explain this phenomenon by the supposition that the irritation of the mucous membrane of the intestines excites, under certain circumstances, the activity, not of the secreting vessels, but merely of the chyliferous vessels or absorbents. So that the absorption of the liquid particles increases the quantity of fœcal matter, at the same time rendering the evacuation of it less easy. But this hypothesis is not borne out, and evidently regards but one single cause of irritation, whilst there are, undoubtedly, a great number. All the possible

* *Traité des maladies de l'estomac et des intestins*, par C. B. Chardon, 2 vols. Paris, 1843, tom. II, pp. 156, 157.

explanations bring us eventually back to the impenetrable mysteries of organic life, which we in vain attempt to solve. We cannot discover how the various irritations act on the particular organs, nor in what manner they provoke the vital force to reaction.

However it may be, it is an incontestable fact that a state of irritation of the intestinal canal, frequently provokes, besides other functional difficulties, a constipation, as chronic gastritis, hæmorrhoids and gout daily prove to us. We shall proceed to search for the etiology of irritation, and to separate its different species of concomitant symptoms, so as to ascertain, as well as possible, the various causes of the irritation, and thus to find a thread which may lead us to the choice of a medicine.

By irritation of the intestinal canal we do not understand merely the pathological state which *Broussais* and the new French school designate by this name, and which most frequently precedes the inflammation properly so called, or which may be considered as the first degree (of congestion, of impletion) of its organic destruction. We take this expression in a much more extended sense, for what the expression means, viz., for a state in which the intestinal canal is more irritable than in the normal state, and the following classification will enable us to dispense with every other definition. As a general rule we may remark that irritation has not, like atony, its principal seat in the lower part of the intestinal canal, but rather in the upper portion, between the stomach and ileum, and that it often extends over the whole tract of intestines. All persons, without distinction of age* or sex, may be attacked by it, and we will find in very

many forms of disease, such as gastritis, dyspepsia, cardialgia, hysteria, hypochondria, &c., the general type of irritation. It is probable that in the majority of cases, the state of irritation of the intestinal canal and the concomitant symptom of habitual constipation, will be classed according to the following causes.

1. *Nervous Dyspepsia*.—It is proved by physiology and by experience at the sick bed, that the interior surface of the stomach, as well as of the jejunum, possesses a sensibility different from the general sentiment, or, in other words, that the ganglionic nerves have their own particular irritability, independent, to a certain extent, of that of the skin and of the other organs; so that the ganglions may be in a state of considerable irritation, without the manifestation of important troubles in other organs. Indeed it not unfrequently happens that the organs, whose functions are immediately determined by these ganglions, preserve a perfect integrity in every other respect, as well as in their structure. *Johnson** states that a host of patients, who had for years experienced all the most severe symptoms of dyspepsia, and had daily suffered almost insupportable pains, presented, after death, not the least trace of anomaly in the organs of digestion and in others. Such are those patients, who, after each meal, complain of distress, of ill humor, and a host of inconveniences or of pains in all those parts of the body, which have certain idiosyncrasies against particular odors or aliments who frequently describe their condition by saying, that they would be perfectly well, if they could live without eating; who, in fine, despite the considerable inconveniences which dyspepsia causes them, have a clear tongue and most of the other functions in the normal state. A habitual constipation ordinarily accompanies this nervous dyspepsia, a constipation which, how-

* In early infancy there exists an almost continual irritation of the digestive apparatus. Difficulties of some duration are comparatively less frequent, because at that age vegetation is extremely energetic, and readily compensates for even important irregularities.

* *James Johnson* on Hysteria and Hypochondria.

ever (and this is a characteristic symptom of this class of patients) alternates occasionally with diarrhœa more or less violent, for several days, after which it re-appears with greater obstinacy. It is very probable that this pathological state of the digestive organs is frequently caused by a derangement of the ganglionic nerves. But, that the evil, as many physicians maintain, proceeds from a want of harmony between the activity of the stomach and the rest of the intestinal canal, which causes the chymified aliments to excite too much or too little irritation when they arrive at the jejunum, and an idiopathic affection of the ganglions, to predominate in this state, is a hypothesis, with regard to which we have no certainty, and can only hazard supposition, as is the case, indeed, in the majority of nervous diseases. All that we know, is that the morbid phenomena of which we have just spoken, are connected sympathetically with a great number of others still unknown, when the organs which are in immediate connection by the nerves, or in functional relation with the digestive organs, are attacked. Daily experience teaches us that the most ordinary occurrences, such as a chill, mental emotions, violent physical exertion, operate on the functions of the intestinal canal. To these sympathetic irritations belong especially those morbid phenomena, known under the names of hysteria and hypochondria, which have their cause at one time in an affection of the pancreas, at another in an affection of the spleen, of the kidneys, of the organs of generation, or of the brain. As long as the morbid state of the organs connected with the intestinal canal, has not reached a visible degeneration, as to form and consistence, the immediate cause of the nervous irritation of the intestinal canal is so much the more difficult to discover than the sympathetic malady; the nervous dyspepsia shows itself suddenly and with violence, and thus

masks the less apparent symptoms of the principal affection. This is the reason, too, why, in the majority of cases, it is no easy matter to determine with certainty whether difficulties of the digestive organs, embracing constipation, will lead to a new sympathetic disease. The symptom which, in this case, will form our best guide, is the constant change of phenomena, and diarrhœa alternating with constipation.

The difficulty of discovering the primitive cause of the trouble in nervous dyspepsia, embarrasses the choice of the suitable medicines. *Ignatia* and *Causticum* have a somatic and physical relation to the ganglionic nerves, and will render essential service, or at least will produce great relief. But more frequently, the complete obscurity of the primitive trouble will, if these means fail, cause us to fail in a general indication, and we will find ourselves obliged to have recourse to the purely sympathetic treatment, as laid down by Hahnemann. It will then be necessary, in the comparison of the groups of symptoms of the disease, with those of the medicament, to pay particular attention to phenomena apparently of little importance, especially if they constantly recur; whilst those which seem more important vary, because they are the ones which will chiefly enable us to discover the true cause of the complicated disease under consideration.

2. *State of congestion* (or irritation in the narrowest sense) *of the intestinal canal*. This state arises as a consequence of inflammatory diseases, of the abuse of powerful medicines, as the influence of metastasis or irritation, which produce a too abundant flow of the juices to the intestinal canal, and consequently an over-excitation of that organ, and chiefly of the mucous membrane.

The most frequent cause of all the diseases of the lower belly is the artificial mode of life, which exercises its fatal influence over all

classes of society, and chiefly the rich, and the inhabitants of large cities. The facility of satisfying, not only the real wants, but the caprices of the stomach; occupations, frequently unnatural, and of different conditions; the excessive development of certain forces and functions at the expense of others, &c., have withdrawn the majority of mankind from the guidance of nature. The quantity and quality of food is no less hurtful to many, who consult their palate rather than their actual wants. If these aliments and this mode of life provoke a state of irritation of the stomach and intestinal canal, it may easily be kept up by articles, apparently harmless, as, the moderate use of wine or spices.

A natural consequence of this continual or frequent irritation, is a derangement of the natural function of the intestinal canal, which shows itself in two ways, either by diarrhœa or by constipation.

If the constipation caused by an irritation of the mucous lining of the intestinal canal, continue two or three days, symptoms declare themselves not only in the digestive apparatus, but in other systems; loss of appetite, heavy, dull pain in the lumbar region, tympanitic state of the belly, pulsation in the region of the stomach,* cephalalgia, general uneasiness and ill-humor, are the phenomena at first observed. By a prolongation of the disease, foul tongue, bad breath and taste, hard and quickened pulse. Oftentimes other secretory organs seem disposed to take the place of the secretion of the intestinal canal, and the increased activity of the skin or of the kidneys comes to the patient's relief. As soon as an evacuation at length takes place, all these troubles disappear at once, even when the amount of the excrements does not seem to

be in proportion to the continuance of the constipation, and the quantity of food taken in the meantime. A characteristic symptom of the state of irritation, is that the change of food or of the manner of living often exercises a powerful influence over the duration of the constipation and the health of the patient. All stimulating meats, wine, and spices aggravate the evil; nutritious food, and a regular mode of life relieve. It often happens also, when the patient takes certain things, as for example, milk, drinks containing carbonic acid, and even without any appreciable cause, that an obstinate diarrhœa alternates with the constipation; nutrition suffers. These few indications establish already some essential differences in the *ensemble* of the symptoms of constipation produced by irritation, and that resulting from atony of the intestinal canal. In the latter, the symptoms are less intense, nutrition suffers less, and it is more difficult to obtain a palliative amelioration by the choice of articles of food. We must, however, decide, without hesitation, whether the trouble proceed from irritation or from atony. We not unfrequently find cases in which these two states are met with in one and the same individual, viz.: atony and dilatation of the lower part of the intestinal canal (commonly of the rectum) and a considerable irritation of the upper part (the stomach, the jejunum and the ileum.) This combination is observed especially in old cases of hypochondria and hysteria, in which the disorganization of the ganglia, and the irritation of the upper portions of the intestinal canal, which is the consequence of such irritation, are accompanied by a dilatation and a great sluggishness of the large intestine. In like manner, we frequently find, in organic changes, especially in strictures of the rectum, a complication of atony and irritation.

3. *Chronic gastritis.* The state of irritation of the mucous membrane of the stom-

* *Hohnbaum*, ueber Pulsation der Oberbauchgegend, als Symptom der Indigestion. Hildburghausen, 1836.

ach and jejunum, the most frequent result of our wholly artificial mode of life, is so common that patients pay no attention to it, being unaware of its danger. This morbid state which seems to them unimportant, and which sometimes intermits for a long time, is the commencement or even the first period of all the numerous troubles of the lower belly, of organic changes, of strictures, of polypi, of sarcoma, &c. Moreover, this irritation of the whole intestinal tube begets a disposition to contract certain contagious diseases, and favors the development of them; and of late years the ravages of *typhus abdominalis* and *Asiatic cholera* in our large cities, may, in all likelihood, be attributed to the irritation of the digestive organs of the population.

It is beyond doubt that the chronic inflammation of the stomach is, in most cases, but the consequence of the irritation of which we have been speaking. The disease, arrived at a certain stage of development, will be readily recognized in its essential symptoms: continual pressure; burning pain in the region of the stomach, worse after eating certain articles of food; painful respiration, from the pressure of the diaphragm on the sick stomach; incessant distress and vomiting; peculiar appearance of the tongue, the edges of which are red and sore; obstinate constipation; small and quick pulse, irregular menstruation, ill humor (sympathetic effect), cachectic appearance denoting great suffering. But, on the other hand, it is the more difficult to distinguish the disease, at its inception, from all the other general symptoms of dyspepsia in the state of general irritation, inasmuch as it is often identical with the latter, namely, with the irritation of the mucous membrane of the stomach, or, at least, presents the same phenomena. The symptom of a constipation more or less obstinate is always present, even at the commencement of the disease, and always deserves the most serious attention, as

soon as other circumstances indicate a severe irritation, and announce the establishment of the disease in the stomach. The most essential diagnostic point, and which is almost always decisive, is the constancy of the symptoms. As long as the indications of irritation are still varying and intermittent, we may hope that the disease is only in the incipient stage, and that a suitable regimen and some slight medication will be sufficient to bring about a cure. But as soon as the symptoms present a certain regularity, and when we observe, especially, a heavy, burning sensation, or a well marked sensation of pressure in the region of the stomach, or even regular alternations, we are warranted in the opinion that the malady has already become a dangerous inflammation of the stomach, and that the various degenerations of the mucous membrane which are the consequences of it, are about to take place. The symptom of habitual constipation, which is always present in these cases, does not deserve particular attention, and will disappear with the principal malady, if the latter can be cured.

The affections of which we have thus far treated, and which are attended by habitual constipation, have their seat immediately in the mucous membrane of the intestinal canal, although we cannot doubt that the muscular membrane, by its position and close connection with the vessels and nerves, will be frequently affected also. In our day, we designate by the name of *gastrodynia* and *enterodynia*, a disease which attacks in preference the muscular portions of the intestinal canal, and which is always accompanied by the symptom of constipation.

4. *Gastrodynia* or *enterodynia*, according to M. Chardon and other writers, is merely a circumscribed irritation on the muscular membrane of the stomach, or of the rest of the intestinal canal, with a predominant rheumatic character, which is confirmed by the

history of the case and the symptoms of the disease.

This affection shows itself principally as a consequence of external or internal chills, caused by very cold drinks, by violent changes of temperature; it attacks most frequently individuals subject or predisposed to rheumatism. It commonly begins by a sudden pain in the epigastrium, which is not exacerbated by pressure, as long as it has not attained a high degree of intensity; the patient is obliged to bend the body forward, which gives him some relief. The pains are drawing and tearing, like colics, and are usually regular, as of a spasmodic nature. The attacks vary, and what indicates the rheumatic character of the disease is, that they readily transfer themselves to other serous organs, namely, to the perineum, especially that portion which is reflected over the bladder, and no less frequently attacks the extremities. The attacks at night are the most violent; although they leave between them intervals of several hours.

Enterodynia may become an inflammation, as a consequence of a too violent irritation; but as a general rule, this does not happen, and it becomes chronic: so that at every attack of rheumatism there is a relapse of three to eight days' duration. The capital difference lies in the indication *ex juvantibus et nocentibus*. Cold, especially cold drinks, aggravate the state; moderate heat and a diet slightly stimulant, ameliorate it. At the commencement of the disease the tongue is always clean, and it is only at a more advanced period that it becomes covered with a white coating, because, probably, the mucous membrane is eventually attacked. We observe, also, sympathetic symptoms, headaches, somnolence, difficulty in the urinary organs, &c.

The attacks, when they continue several days, are always attended with derangement of the organs of digestion, loss of appetite, constipation. This phenomenon may be ex-

plained by supposing that the muscular portions of the intestinal canal, affected by the rheumatism, lose the power to contract and dilate alternately, because this cannot be done without pain, and the inflamed muscle refuses to perform its functions, or, at least, reduces them to the *minimum*.

Without attaching too much importance to this explanation, we will content ourselves with having pointed out that the symptom of habitual constipation is sometimes produced exclusively by an irritation of the muscular portions of the intestinal canal, and that, if the symptoms warrant it, we can remove it by means of some suitable medicines against rheumatism, before the mucous membrane becomes affected.

Treatment.—In cases of irritation of the mucous membrane, accompanied by the symptom of constipation (nos. 2 and 3,) the physician ought, more than in any other case, to pay attention to the history of the case; it is frequently to antecedents that the continuation of the irritation is due. Among the numerous patients who owe their sufferings to their artificial mode of life, and who have already tried to get rid of them, but without success, by all sorts of remedies, the mode of Celsus, i. e. the discontinuance of all medication, and a severe diet, will prove sufficient to diminish in a short time the intensity of the disease, and gradually to remove it. By a severe diet, we do not mean to say that it is enough for the patients to abstain from the heating viands to which they have been accustomed, nor to recommend to them cold water, that universal panacea. The most of them have abused their stomach in the days of their health. Digestion once deranged, it is no longer enough to abstain from every excess, since frequently a relative moderation is still an excess. It is necessary, then, to diminish the *quantity* of food, and not to take even that quantity in two meals. The patient should

make four or five meals of it during the day, and eat the less at each meal. The organs of digestion, when they are deranged, are surcharged by even the most suitable nourishment, if all their activity is required to digest it. The less we task the diseased organ, the more easily will digestion be accomplished, and the more promptly will it return of itself to the normal state. As a general rule, we should recommend the patient never to eat enough at one time to feel himself incommoded thereby; although, in certain cases of very great irritability, the smallest quantity of food is sufficient to cause distress.

In regard to the quantity of food, it would be difficult to establish general rules. Each individual ought to choose for himself those articles which he digests best, those which in a smaller volume contain a greater quantity of nutriment; but there are some articles which cause more or less distress than others, and those which are most injurious should be entirely forbidden. The disposition of certain persons to acidity should always be taken into consideration, because it is frequently the principal cause of keeping up the disease, and the choice of food depends essentially on it.

In conjunction with this regimen, the use of cold water as a drink, and occasionally a warm bath, which gently excites the activity of the skin, will render essential service.

But as a purely dietetic treatment does not answer for all patients, when we are obliged to have recourse to therapeutic means, we should choose in preference the following :

Nux vomica and *Bryonia* (3—6 dil.) administered in alternation every week or fortnight, will seldom fail in slight cases, especially among patients, in whom a sedentary life and the long-continued use of spirituous liquors, even in moderate quantity, have weakened the digestive organs. These two medicines should be administered at longer intervals, and for a longer time (three or four months) if we wish to obtain a permanent cure.

Pulsatilla alone will never cure irritation of the intestinal canal and the constipation which is the consequence of it. But it is an excellent preparatory means in all cases in which the disease proceeds from excess in sensual pleasures. It is no less useful for women in whom the sexual functions are deranged. The low dilutions (1—3) must be used.

Carbo vegetabilis is indicated in several cases, especially in those of hypochondria, where the irritation of the intestinal canal shows itself by the production of a great deal of wind in the lower belly, borborygmus, tension as in colic, inflation and tenderness in the pit of the stomach and in the region of the stomach; or where the respiration, painful on account of the pressure of the diaphragm, the tongue loaded, with reddish edges, announce a considerable irritation of the stomach; or where, in fine, the stools are preceded by the passing of much flatus, the fæces hard and in insufficient quantity.

Lycopodium has nearly the same effects. The most useful mode of administering it, is to give it in alternation with *Carbo veg.*, about every eight days. It is indicated more precisely when there is an ineffectual desire to go to stool, and painful pressure on the bladder, with difficult urination.

Zincum has lately been recommended by *M. Hampe* (*Hygea* X. 2, page 112.) in hypochondria and chronic gastritis, at the beginning, and accompanied by constipation; the symptoms which serve as indications are: tongue coated or even red, with swollen papillæ, dryness of the buccal cavity, degeneration of the gums with aphthæ, intermittent fever, pulse accelerated, red face during the act of digestion, respiration painful and skin rather dry. These symptoms announce a deep-seated affection, and belong no longer to the state of irritation of the mucous membrane, but indicate that the disease has passed to a state of chronic inflammation, and the degeneration

which accompany it. We confess, however, that we can adduce no experience of our own with Zinc, although we have never heard any doubt raised with regard to the effects ascribed to it.

Arsenicum is the medicine which we have found the most efficacious and most indispensable, when the symptoms mentioned in No. 3 proclaim a high degree of irritation, and the passage of the disease to a state of chronic gastritis. This means, the principal one, as we know, against enteritis and typhus abdominalis, extends its energy wherever the mucous membrane of the intestinal canal is disposed, by the local irritation, to the destruction of its tissue, and may cure even the actual commencement of destruction.

It will render us important service, as a remarkable case has recently proved, even when all other remedies have failed. Three or four drops of dilutions 3 to 6, at a dose, will act with sufficient energy, and we will rarely have occasion to have recourse to a lower dilution.

Nux vomica and *Stramonium*, medicines which M. Chardon has also found efficacious, (pages 333—336 of his work) answer most frequently to the rheumatic irritation of the intestinal canal, which we have previously designated under the name of gastrodynia and enterodynia. We will obtain good service also from *Dulcamara* and *Aconitum*, in recent cases, and from *Colocynthis* and *Helleborus* in chronic and obstinate cases.

ERUPTION OF SMALL POX.

It has lately been proposed to cover the face with gold leaf, to prevent the eruption of small pox; but this plan, proclaimed as a new discovery, has already been suggested in the "*Remèdes souverains et secrets expérimentés par le Chevalier Digby*, Paris, 1689.

GLEANINGS—NO. XII.

BY DR. J. C. PETERS.

1. JAHN (*see system der Physiatrik, oder der hippokratischen Medecin*, vol. 2, § 126) says, we must also be able to cure diseases according to the law *similia similibus curantur*. In fact experience teaches us that this method may often be adopted with beneficial results: in chronic inflammations of the eyes, the external application of irritating remedies, such as Red precipitate, Cuprum aluminatum, various preparations of Copper and Zinc, Corrosive Mercury, Lunar Caustic, &c., is often followed by a cure; in chronic inflammations of the throat, irritating gargles made of tincture of Pimpinella, Spanish pepper, Meze-reum, &c., may often be used with benefit; sluggish traumatic, and inflammations of external parts in general, may be cured by external irritating applications; acrid remedies often avail in toothache; a number of well proved remedies appear to cure in accordance with this law, such as Balsam Copaiba in leucorrhœa of the genito-urinary mucous membranes, the gum-resins and expectorant remedies in catarrhs of the respiratory mucous membrane, Sulphur in piles, Sulphur and similar remedies in skin-diseases, Borax and Sulphate of Zinc in aphthæ, the balsams in supurations, Cinnamon in hemorrhage from the uterus, &c. Jahn adds, that many other instances will be found in Hahnemann's *Organon*, which, he says, will always remain the remarkable book of a remarkable man, notwithstanding the admixture of many erroneous precepts. This method of cure, he further says, was, in fact, known to the heroes of the profession in all ages, but they were not so short-sighted as Hahnemann, whom Simon terms a decillionth of a physician, as to regard it as the

only means of curing disease. Hippocrates recognized and practised upon this mode. Paracelsus even went as far as Hahnemann, in regarding it as the only true method of curing disease; he says *contraria contrariis*, i. e. heat cures cold is false, and never held true in medicine—there never was a hot disease cured by cold remedies—it is profitable to oppose like to like—know ye, that like attacks and overpowers like, and none other.

2. In the *Dublin Journal of Medical Science*, vol. 22, p. 118, we read that the *sedative*!! effects of Balsam Copaiba on irritability of the urinary organs is well known. Wood and Bache says “it extends an *irritant*! action, not only throughout the alimentary canal, but also to the urinary passages; even in health, if taken largely, it sometimes produces very unpleasant irritation of the urinary passages, and, by sympathy, of the testicles. So that it would seem that Copaiba is a pathological irritant to the healthy man, but becomes a therapeutic sedative to the sick.

3. Rasori and his followers, seem to have recognized that irritants to the healthy man, often prove sedatives to the sick, for in their list of contra-stimulant or hyposthenic remedies, i. e. such as depress the vital energies, we find: Cantharides, Squills, Colchicum, White Hellebore, Turpentine, Copaiba, Bark, Iron, Hemlock, Gamboge, Castor Oil, Henbane, Nux vomica, Poison Sumach, &c.—(See *Pereira's Materia Medica*, vol. 1, p. 142.)

4. In *Schonlein's Allgemeine und specielle Pathologie und Therapie* vol. 2, p. 193, we find a chapter devoted to the consideration of “*Rheumatisms which arise in consequence of the abuse of certain drugs.*” We learn that among the metals, Arsenic and Mercury are the most apt to excite rheumatism, but that Zinc, Lead, and Bismuth also seem capable of producing similar affections. Rheumatismus metallicus is very apt to pass over into rheumatismus paralyticus. Women who suffer

with habitual spasms, and use large quantities of Chamomilla or Valerian, are not infrequently attacked with Chamomilla- or Valeriana-rheumatismus. Cinchona and Sulphate of Quinine, if given in large quantities, and their use be long persisted in, may even excite an acute form of rheumatism, which bears a strong resemblance to rheumatismus acutus.

Schonlein says, from the little which is known of these diseases, we obtain the following materials for the diagnosis of the same.

1. Patients, in whom no symptoms of rheumatism have been present, are suddenly attacked while using one of the above drugs, with rheumatism, and that without being exposed to the common exciting causes of this disease.

2. In Chamomilla- and Valeriana-rheumatism, the head is affected in a peculiar manner, and headache is present.

3. In Cinchona-rheumatism the muscles of the head and face are particularly affected—the affection is generally confined to one side—and not infrequently the limbs are also attacked, especially the arms.

4. After the abuse of Sulphate of Quinine, a form of rheumatism which attacks the joints in particular, is apt to arise—the joints swell; become extremely painful; even inflammatory fever may also be present.

5. In Arsenic-rheumatism the legs are the principal parts affected.

Every Homœopathist knows full well that Hahnemann found the Peruvian Bark to cause various rheumatic affections, such as: red and hard swelling of the thigh, which is painful to the touch;—Arthritic swelling of the knees and feet, which are painfully sensitive to the touch, and attended with fever; swelling of the feet, sometimes with a red blush upon the skin of the part affected, &c.

Raulin (quoted by Harnisch) asserts that rheumatism is said to have arisen from the use of Bark.

Lately, we were struck by the following passage in Sydenham (Swan's edition, 1742, p. 251). "There is another species of rheumatism which is near akin to scurvy, for it resembles it in its capital symptoms. The pain sometimes affects one, sometimes another part, but it does rarely occasion a swelling, as in the other species, neither is it attended with fever. It is also a less fixed pain, and accompanied with irregular symptoms; sometimes it affects one limb, sometimes another; sometimes it only attacks the internal parts, and causes sickness, which goes off again upon the return of the pain of the external parts. In this manner the patient is alternately affected, and the disease proves of long duration, like those distempers which are esteemed most chronic. *Such likewise as have gone through a long course of the Peruvian Bark are subject to this disease*, which, by the way, is the only ill effect I have ever observed from the use of this medicine."

When such accurate observers as Schonlein, Sydenham, and Hahnemann, agree in the belief that Bark causes rheumatism, there must needs be some truth in the matter.

As yet Bark has been used but very little in acute rheumatism by the Homœopaths, and we are very sceptical whether "little doses" of it will effect cures; but there is abundant Allopathic testimony of its efficacy in this disease. Thus we read in *Good's Study of Medicine*, vol. 2, p. 603, (4th American Edition) that extraordinary and decisive benefit has accompanied the free use of Bark at an early period of the disease. Good says, "contemplated as a highly acute inflammatory affection, nothing could at first sight appear to be more inconsistent with all rational practice than the use of such a medicine. Yet in direct opposition to such feelings, and to the assertion of Cullen that the use of Bark is manifestly improper in acute rheumatism, we find the Bark freely prescribed from the onset of

acute rheumatism, apparently with success, by Dr. Morton, who seems first to have employed and recommended it for this purpose, down to our day, through a stream of the most celebrated physicians, as Sir Edward Hulse, Dr. Hugh Smith, Dr. Fothergill, Dr. George Fordyce, and Dr. Haygarth of Chester. Fordyce affirms distinctly, that at the time of writing, he had for fifteen years relinquished bleeding in favor of the Bark; and that during this period of time, he had not lost above two or three patients out of several hundreds for whom he had prescribed it; and had rarely met with any instance of a metastasis, a very common occurrence, when he was in the habit of employing copious bleeding. Swediaur has added his testimony to the same effect; he was first taught the value of the Bark in this disease by his friend, Dr. Hugh Smith, and strenuously adhered to its use, from perceiving its benefit, afterwards. The success of Haygarth is not less striking and extraordinary: and the history of it is given with an air of candour that entitles it to full attention. During a period of 38 years, he used it in 470 cases, of which 170 were acute; the average of the pulse was 100, and the blood always exhibited the inflammatory crust when drawn. The Bark failed in four cases out of 121; so that, as Good says, we cannot be much surprised at Haygarth's conclusion that the Bark does not cure an ague *so certainly and so quickly* as it does the acute rheumatism.

In the London Lancet of Jan. 7, 1843, (Am. reprint, No. 8) p. 278, we find an article "On the employment of the Sulphate of Quinine in the treatment of Acute Rheumatism." It seems that M. Briquet of the Hospital St. Louis, having observed the salutary effect of Sulphate of Quinine in typhus fever to be due to its diminution of nervous excitability! retardation of the pulse!! and power of lowering the temperature of the skin!!! has been

guided thereby to its employment in acute articular rheumatism, a disease which calls for treatment followed by similar results. Students are generally taught in the schools, that Quinine excites and stimulates, increases the frequency of the pulse, and raises the heat of the skin, hence we have here another instance that a pathological tonic and stimulant to the healthy man, becomes a therapeutic sedative, under certain circumstances, to the sick man. Briquet used the Sulphate of Quinine in 23 cases; an amelioration took place in all but 4 cases, within 24 hours; in 1 case the morbid symptoms ceased altogether after 48 hours of treatment; the same result ensued in 14 cases during the third day, and 6 during the 4th. The circumstance of the disease being of long standing appeared to have little, or no influence on the period required for cure. Only 1 case refused to yield to the treatment employed, and in none was a relapse observed. A drachm to $1\frac{1}{2}$ of Sul. Quinine, dissolved in 12 oz. of water, by the aid of a little Sulphuric acid, was administered in equal hourly doses, until a cure was effected.

We furthermore read in the *Lancet*, that after the publication of the above statements in the *Gazette Medicale*, M. Rognetta advanced, in the *Gazette des Hopitaux*, that Quinine was long ago employed with success in rheumatism by Rasori, Giacomini, and others.

M. Devergei, also of the Hospital St. Louis, has used it with marked success, in doses amounting from 15 to 30 grains per day, both in acute and chronic rheumatisms.

In the 3d No. of Braithwait's *Retrospect of Practical Medicine and Surgery*, p. 57, we find an article entitled "Treatment of Acute Rheumatism with Cinchona Bark," by Dr. Davis, Professor of Midwifery in University College, London. We find that Dr. Davis first traces the history of the use of this remedy, employed by former celebrated practitioners, as

Morton, Hulse, Fothergill and Haygarth. He then shows the almost complete modern neglect of the remedy, and endeavours to impress upon his readers its value in cases of acute rheumatism. He says: "I have adopted it during the greater part of my professional life; and as it has seldom happened that I had ever occasion to prescribe it, except at an early period of acute rheumatism, I have great satisfaction in assuring my readers that I do not remember a case in which the disease was not happily subdued. I have often recommended it in cases of pure arthritic rheumatism during its acutest stage, and the disease has always yielded to the remedy; and I have also recommended it in violent pains of the joints, accompanied by alarming complications, but never in any one case injuriously to the interest of my patient. I have, therefore, no hesitation in recommending its adoption to my medical brethren, and especially to those who are most frequently favored with the opportunities of seeing acute rheumatism in its earliest stages. I feel myself entitled once more to repeat my confident assertion, that I consider the Peruvian Bark the most powerful remedy that can be employed in an incipient case of acute rheumatism. Without exceptions in my practice, it has uniformly produced the most salutary effects. The pains, swellings, perspiration, and other symptoms of inflammatory fever, manifestly and speedily abate, and gradually cease, till health is perfectly restored. Before I conclude, I beg to repeat, that the measure of bark, which it has been my practice to recommend, has varied between a scruple and half a drachm, repeated 3 or 4 times daily."

There seems to be abundant testimony that Cinchona given in massive doses may force a cure of rheumatism, but we doubt whether it is sufficiently Homœopathic to this disease, to cure when only given in minute doses. It may occasionally excite rheumatic affections,

but we doubt whether this is one of its peculiar and characteristic effects.

5. In *Hufeland's Enchiridion Medicum, Am. Edition*, p. 372, we read that *Nux vomica*, given on the Homœopathic principle, and in minute doses, is very useful in chronic constipation. On page 73, Hufeland says, that the empirical knowledge of remedies which have a peculiar relation to, or curative power over a certain organ, or morbid condition of the system, is extremely valuable, and that the principle *similia similibus curantur*, which embraces within it the knowledge of substances which produce in the healthy organism states similar to those of certain diseases, may very well be profited of, in order to discover such remedies.

6. Hufeland (see *uber die Schrefel-Krankheit*, 2d edit., 1797, p. 193) says: "Mercury and Mercurial remedies belong among the oldest and most useful remedies against scrofula, and will no doubt remain so, let theories change as they may. In all probability theories will change to suit the remedies, sooner than the action of remedies will change to suit theories. But lastly, a very worthy physician and author, Girtanner, has sought to weaken the confidence which is placed in these remedies in the cure of scrofula, by assuming the position, that as they excite the lymphatic system, they cannot be appropriate in a disease in which this system is already very much excited. But then, with the same justice, we might condemn their use in venereal diseases, in which, as is well known, the lymphatic is equally, if not more excited; and yet they are most efficient remedies in these diseases. And besides this, it is well known that one irritation may overcome another. Hence we would rather cling to experience than theory; and experience undoubtedly testifies strongly in favor of the use of Mercury in scrofula. The most plausible notion of their action in this disease, is that they excite a

specific irritation in the lymphatic system, which overcomes the irritation excited there in scrofulous diseases, in accordance with a law which holds universally true, that there are specific differences of irritation, and that one species of irritation, be it disease-irritation, or drug-irritation, may remove or destroy another.

7. In *Schonlein's Allgemeine und specielle Pathologie und Therapie*, vol. 3, p. 204, we read: "That physicians are aware of the influence of Mercury on the liver, but very few seem to know that it produces a chronic form of jaundice, although this result is far from being rare." In our first Gleaning we quoted Dr. Johnson, who says: "Dr. Collis takes no notice of a tendency to jaundice after a Mercurial course. Yet we [Dr. Johnson] have seen several examples of it."

8. Our 11th Gleaning was formed exclusively from materials furnished ready to our hand by the industrious and enthusiastic NOACK, in the first part of the *Handbuch der Homœopathischen Arzneimittellehre*, by Drs. Noack and Trinks; the second and third parts having been received, we continue our selections. Of *Aurum* Richter says: (see *Ausführliche Arzneimittellehre*, vol. 4, p. 407,) "the ancients used it successfully against hypochondria, melancholy, idiotcy, and chronic spasms, and physicians of the present age perhaps do wrong, in not giving it a trial in these obstinate diseases. The Homœopathists at least are free from this rebuke, and Hahnemann has been much laughed at for his strenuous recommendation of this remedy in Melancholy. Dieterich mentions that when *Aurum* is given against condylomata, new ones appear, and the old ones increase in size, but afterwards they all disappear; other observers have noticed that it caused condylomata to appear upon the rectum, prepuce and tongue. GROTZNER notices *Aurum Muriaticum* produce hoarseness, with violent fever, while WENDT recommends it in *Phthisis trachealis*.

GMELIN mentions that it was formerly considered an excellent remedy in the colics of children, and HOFFMANN recommends it from personal experience, while Burdach and Kocklin say that it produces colic, and the latter even mentions that when given against other diseases, that the occurrence of colicky pains in the stomach and bowels, may often be looked upon as a certain sign that a speedy curative action will follow.

9. According to NOACK, it is generally admitted that *Baryta Muriatica* exerts a specific influence upon the glands. Orfila asserts that it exerts a quite special and specific action to render the blood more arterial, thick, solid, and coagulable; while Hufeland states that it causes febrile excitement; Burdach has seen it produce dry heat and excited pulse; and Sachs says it is very apt to cause acceleration of the circulation, and a general irritable and febrile condition. Yet Hufeland has the honor to have been the first to recommend it in *scrofula florida*, when an inflammatory diathesis is prominently present, and the lymphatic system is in a violently irritated and inflammatory condition, and especially when scrofulous ulcers and indurations have a great tendency to inflame; RICHTER says he has had frequent opportunities of seeing unmistakeable benefit arise from its use in *scrofula florida*; and WENDT says it will avail in scrofulous and florid consumption, when all other remedies have failed.

10. Some authors have compared the action of *Belladonna* to that of a very acute *Febris inflammatoria nervosa*; others state that it produces a high degree of *Turgor Venosus*, and *Febris Venosa*, yet BRERA recommends it highly in typhus fever. Professor Albers of Bonn, uses it with success in *Febr. intermittens perniciosa*, when attended with delirium and most violent pains in the forehead. Barbier says that Bergins used *Belladonna* with success in convulsions, but adds that it is very

difficult to conceive how it can cure, for it seems better adapted to exasperate such affections than to cure them; we would merely add, that there is scarcely a *materia medica* extant in which we cannot read that *Belladonna* excites convulsions, yet we read in the Dublin Journal of Medical Science, vol. 22, p. 456, that Dr. Debreyne regards it as decidedly the best remedy in the treatment of epilepsy—as far superior to Lunar caustic, Zinc, Copper, &c.; he states that he has used it in near 200 cases, and scarcely in one without benefit—the more frequent the attacks the more readily the complaint is said to yield to the influence of *Belladonna*. Brera says it is well known that *Belladonna* excites an affection similar to *Hydrophobia*, yet his own experience teaches him that it is an excellent remedy against this fearful disease, and Sauler, as late as in 1841, has published cases which he has cured, even after the first, second, and third paroxysms. Even Harnisch says, Homœopathy affords a very convenient explanation of the cure of *Hydrophobia* by *Belladonna*, and adds, as it cures this disease more certainly and readily than many other remedies, we must even ascribe this to the peculiar and specific action which it exerts upon the nerves of the throat and larynx. KUMMER says, that the, until lately very much doubted, preservative and curative efficacy of *Belladonna* in scarlet fever, has been positively and satisfactorily proven by the numerous and conclusive experiments of Bernat, Formey, Meglin, Dussenberg, Behr, Benedix, Wesener, Zench, Kohler, Bang, Hufeland, Dehler, Feron, Wolff, Kraus, and Richter. Schonlein says that it certainly prevents scarlet fever, by its specific action in lessening the sensibility! and irritability? of the nerves of the throat. LISTON advises 1 gr. *Belladonna*, dissolved in 16 ounces of water, 2 table spoonfuls to be given every three hours, in erysipelas of the face and head. DREYSSIG has used it with

much success in inflammation of the brain; and HUNNIUS has seen speedy cures of acute dropsy of the brain follow the use of one eighth of a grain every two hours. SCOTT cures *mania puerperalis* with it; LEVERS has become notorious for his success in mania, with this same remedy; TROUSSEAU and PIDOUX say in their *Traité de Therapeutique*, that many experiments corroborate the efficiency of Belladonna in certain forms of derangement of mind, and add, that we would even be lead by analogy to use this remedy in such diseases, for it excites a kind of derangement in the healthy, and experience teaches us that a great number of diseases may be cured by means of drugs, which act similar to the causes of disease. Jacob, Gerson, Julius, Wedemayor, Welsch, Lambert, Richter, Riccord, Robertson, agree in praising the efficacy of Belladonnain inflammations of the eyes, especially when the retina is very irritable; while Voigtel, Stark, Herber, Boily, Stavenhagen, Richter, and Sundelin, speak highly of its use in neuralgia, yet in post mortem examinations, in cases of poisoning with Belladonna, inflammation of various of the nervous sheaths have been found, but especially in that of the optic nerve. It should be constantly held in mind that not one of the authorities here cited are Homœopathists.

CASE OF PRACTICE,

BY E. HUMPHREY, M. D.,
UTICA.

The following case of Sycosis has recently fallen under my care, and the treatment of which has been attended with success, is hereby transmitted; if you think it worthy of a place in the columns of the Examiner, it is at your disposal.

H. W., aged 35, of sanguine temperament,

a full liver, and much addicted to the use of ardent spirits; contracted Syphilis in December, 1842, for which he was treated by an Allopath until July following.

During that period he took mercury without stint, not omitting the usual concomitants in such cases, to the entire exhaustion of the catalogue, until near the time I saw him, when the last chancre was destroyed by caustic.

At this time July 20th, he had an excrescence on the inside of the instep, of the size of a dollar, characterized by the usual symptoms of sycosis, the surrounding parts tender and painful. This was followed by others upon the toes, head, arms, hands, body, &c., indeed there was no part that was exempt from them. They were in size from that of an ordinary vaccine pustule, to that of a dollar. They were of rapid growth, soft and spongy in texture, themselves not tender, but surrounded by a blush of inflammation, quite tender and sensitive;—The apex of the tumour, which was flat, was easily separated, and was uniformly reproduced the succeeding day.

No suppuration took place, although inflammation in many places surrounded them that seemed to indicate it. But as the cure progressed, the inflammation subsided, new and healthy action supervened upon the vegetative process, and the excrescences gradually gave place to a healthy condition of the skin, leaving no scars behind in any case. The remedies used during the treatment, were Sulph., Merc., Aurum, Nitr. Acid, Thuj, Ars, Lach. The treatment was continued several weeks before symptoms of improvement began to manifest themselves, when Thuj. was given in grain doses of 2d dilution, and repeated daily.

"This produced a decided aggravation, and particularly in the nerves of the forearm and hand, in which the pain was of the most aggravated character, which continued for several nights. A dose of Lach. produced an abate-

ment of the neuralgia. At this time his vegetations were assuming a more healthy state of action.

But he was destined to endure another visitation of his neuralgic pains. He now took several different medicines without benefit, when a few globules of *Ars. 3*, produced a transient but powerful impression upon the already excited nerves of the arm and hand, which was followed in a short time, with complete and permanent relief. From that time his cure has progressed with rapidity; under an occasional use of *Thuj*, until this time, his excrescences having all disappeared and his cure complete.

H. W. gave the disease to his wife, who was treated by the same physician until I was called to attend her for Aphonia. On examination I found the tonsils inflamed, enlarged and ulcerated, cavernous in some places, in others deep fissures,—one had the appearance of being incised. The ulcers were covered with a yellow coating, closely adherent, the upper lip was wirted and greatly swollen, the middle of the red part was occupied with an ulcer of the size of a two shilling piece, superficial and covered with a yellowish coating closely adherent. The right eye and eyelid inflamed and swollen, the vessels of the sclerotics highly infected, and the eyeball distorted.

On the head were several isolated tumours, on which formed a dry scab. Also, several condyloma upon the extremities and upon the body. The Ophthalmia yielded to the use of *Bell.*, *Sulph.*, *Nit. Acid*.

The ulcers upon the tonsil, lip, and the excrescences upon the surface, were treated with *Mur.* and *Sulph.*, *trit. 3d* in alternation, followed by *Thuj.* and *Nitric Acid*, which appeared to control the disease. Other remedies were used in the course of treatment, but they appeared to possess but little power in controlling the symptoms.

The catastrophe did not end with the

mother. She was advised by her physician, that there could be no possible danger in nursing her infant then ten months old. The child of course contracted the disease, which manifested itself in the form of *Lepa*; its extremities were thickly studded with copper-coloured scaly spots, a few only being on the body.

These were the only evidences of the contamination. They were removed in a short time afterwards, under the use of *Merc.*, *Sulph.* and *Nitr. acid*.

PROCEEDINGS

OF THE

NEW YORK HOMŒOPATHIC PHYSICIANS,

OCCASIONED BY THE

DEATH OF HAHNEMANN.

On the 9th day of August, immediately after the arrival of the sad intelligence of the demise of our good old master, the "Homœopathic Physicians' Society" assembled, and prepared suitable resolutions for the occasion.

The Corresponding Secretary was instructed to write a letter of condolence to Madame Hahnemann. (A copy of this communication, which was promptly dispatched, is given below.)

The Society, then, on motion of Drs. Kirby and Ball, proceeded by ballot, to choose a member to pronounce a public eulogy on the character of the deceased. Dr. Gray was elected for the discharge of this important task, with very great unanimity.

At a subsequent meeting, the Society instructed the President, Vice President, and Corresponding Secretary, Drs. Channing, Joslin and Gray, to address a letter to all the

physicians of the school in the United States, to convene in this city on the 10th of April next, Hahnemann's birthday, when the Eulogy will be pronounced, and other proceedings will doubtless take place, to commemorate the great services of the illustrious sage.

Dr. Wilson, ex-president of the Society, and Dr. Dannel, the Recording Secretary, have been added to the Committee of convocation, by Dr. Channing.

We sincerely trust every one of our patrons will attend the solemn festival of the 10th of April. Strangers can report themselves to Dr. Gray or Dr. Channing, on the evening of the 9th April, when, probably, a preliminary meeting will be held at the residence of one of these gentlemen.

Simultaneously with the foregoing transactions, the "New York Homœopathic Society" was convened by its President, Mr. Bryant. The choice of the Eulogist was unanimously confirmed, and the President was requested to write a letter to Madame Hahnemann, in the name of that Society. The Society resolved to attend the Festival, and appointed a committee of arrangements, to co-operate with a similar committee of the Physicians' Society.

The gentlemen named on behalf of the former Society were, William C. Bryant, Esq., Robert H. Morris, (Mayor of the City,) and John W. Edmonds, (late Senator of this State.)

"New York, 9th August, 1843.

"TO MADAME HAHNEMANN.

"MADAME !

"I am directed by the New York Homœopathic Physicians' Society to express to you the mournful interest felt by each of its members, in the sad event of the 2nd of July. But, Madame, no earthly language can convey the spirit's solemn emotions, when the hand of Divine Providence visibly removes a prophet from among us ; we stand silently gazing up-

ward as the revered one recedes from the grosser field of our natural vision, till the deeper sense of our soul catches a glimpse of that higher sphere, beyond the dread veil which his reception discloses ; a reward is spoken to him whose whole *past* was an ever beaming search for the *true*, an unremitting Industry of Love for his fellow-beings ; but the words of welcome are ineffable, earth hath no element wherein they can become audible ; celestial 'horsemen and chariots' gather around the sacred form of our sage, now no longer ours, but in stillness they vanish, ere we learn ought of his or their glorious uses ! The Past and the Future solemnize their nuptials near us : our share of the infinite festival is Hope !

"We who were disciples of the departed one, wish to say to you, the nearest friend of him we revered so deeply, not what we feel, but that we do feel somewhat of the bereavement which you experience.

"We shall look towards your retreat, dear Madame, with anxious solicitude, with heartfelt prayer for the health and happiness of the beloved relict of our venerable master, of one who not only shared his joys and sorrows as an individual, and as a member of society, but who also studiously sought to aid him in his great Task of Life.

"You are too well aware what he was and what he effected for his fellow men of this and of all coming time, not to know that we are not alone in our aspirations for your welfare ; for you have the best means of knowing that those who mourn with you number by thousands and tens of thousands, in every land where civilization prevails.

"The Lord preserve and bless the widow of Hahnemann !

"I have the honor, Madame, in the name of the Society, to present my most

"dutiful and sincere regards,

"JOHN F. GRAY, M. D."

THE
HOMŒOPATHIC EXAMINER,

BY

A. GERALD HULL, M. D.

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VOL. 3.

PODOPHYLLUM PELTATUM,

BY W. WILLIAMSON, M. D.,

PHILADELPHIA.

It is emetic and cathartic.—I have cured many violent cases of rheumatic complaints with it, proceeding from the imprudent use of mercury.—HENRY.

The fruit is esculent, the leaves are poisonous, and the root is highly medicinal. In intermittent fever it is said to be useful independent of its purgative quality, of which I know nothing myself.—CHAPMAN.

An extract from the root is (also) sometimes employed and has been found useful in Colica pictonum.

It is especially adapted as a purge, to cases of intermittents, remittents, and dropsy.

The root also often operates as an anthelmintic, and as such it is used by the Cherokee and other southern Indians.—COXE.

A decoction was made by putting two ounces of the leaves to one quart of water and boiling and simmering it to eight ounces.

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At 9 o'clock P. M., half was given to a full grown dog, and in thirty minutes the remainder. In ten minutes after the last dose, the pulsation of the heart was very weak, and from 50 to 55 per minute; a copious salivation was produced; increased at twelve o'clock; but no narcotic effect; at 10 and 12 o'clock he vomited; next morning he was found dead; the vomiting having been almost incessant from 12 o'clock until he died.

One drachm of the leaves in powder produced restlessness for a short time in a dog, when he appeared as well as usual.

Six drachms of the extract was made from 2½ ounces of the leaves, and formed into pills of 2 grs. each.

1st. Experiment.

One pill was taken; pulse naturally 76 strokes in a minute—in one hour the pulse had gradually diminished to 65 strokes in a minute and continued so for about two hours.

2nd. Experiment.

Two pills were taken; pulse 74 full and strong—in one hour it had diminished to 61 and in two hours afterwards it was still 61; weak and small.

3rd. Experiment.

Three pills were taken; pulse 76 full and strong—in one hour it had diminished to 64 and in two hours more it remained the same;

small and feeble; accompanied with slight nausea.

In a case of severe cough accompanied with remittent fever; pulse quick and tense; 2 grs. of the leaves were given every three hours; on the second day the pulse being still tense, 4 grs. were given; on the third day there was complete intermission of the pulse and a permanent cure effected.

In a case of pleurisy, after a small bleeding; pulse full; 6 grs. of the leaves were given every two hours, and on the fourth day the patient was perfectly restored.—SNOW.

The root contains resin, gum, or mucilage, amadin, coloring matter, extractive, ligneous fibre, and a small quantity of insipid substance, soluble in sulphuric ether, from which it crystallizes in minute acicular crystals.—STAPLES.

It produces liquid discharges without much griping or other unpleasant effect.

In some instances it has produced nausea and vomiting.

It is slower in its operation and more drastic than jalap.

It is applicable to inflammatory diseases which require brisk purging.

It is said to have been found useful in bilious fevers and hepatic congestions, also in dropsical, rheumatic and scrofulous complaints.

It diminishes the frequency of the pulse and relieves cough; and has therefore been used in hemoptysis, catarrh and other pulmonary affections.—WOOD & BACHE.

It is one of the most safe and active cathartics.

In large doses it produces full vomiting. It is less nauseous to irritable stomachs than jalap.—BARTON.

Remarks.—Much may be expected from

Podophyllum peltatum in periodical diseases.—Congestions of internal organs, especially the liver and spleen.—The symptoms are worse in the morning and generally better in the evening.—Congestion towards the head accompanied with derangements of vision.—Sympathetic affections.—Disease of one organ interrupting the functions of another.—Hypochondriasis.—Indigestion.—Headache from derangements of the digestive organs.—Diarrhœa.—*Dysentery*.—*Prolapsus ani*.—*Hemorrhoids*.—Asthmatic complaints.—Colica Pictonum.—Rheumatism.—Rheumatic affection from the abuse of mercury.—Intermittent fever.—Remittent fever.—Dropsies.—Vermineous diseases.—Diseases accompanied by a *slow pulse*.—Pleurisy.—Cough.—Heartburn.—Waterbrash.—*Cholera Infantum*.

General Symptoms.

Sudden shocks of jerking pains. All the complaints are aggravated in the morning and better in the evening. Restlessness and tossing about. Sound sleep at night. Sleepiness early in the evening. Distress after the first sleep. Rising up in bed without getting awake. Restless sleep of children with whimpering and whining at night. Skin moist but prematurely warm. Sleeping with the eyes half open and moaning. Softness of the flesh and debility of children.

Head.—Dizziness and fulness over the eyes. Dulness and headache with sleepiness in the morning. Momentary darts of pain in the forehead obliging one to shut the eyes, attended with dizziness. Pain on the top of the head when rising in the morning. Pressing pain in the temples in the forenoon, with drawing in the eyes, as if strabismus would follow. Stunning headache through the temples, which is relieved by pressure. Delirium and loquacity during fever, with excessive

thirst. Rolling of the head during dentition in children.

Eyes.—Smarting of the eyes. Drawing in the eyes, accompanying pain in the head.

Mouth.—Copious salivation. Offensive odour from the mouth. Breath offensive in the night, perceptible to the patient. Sourness of the mouth. Throat dry, with the taste of liver in the mouth at night.

Appetite.—Voracious appetite; thirst towards evening.

Stomach.—Sourness of the stomach. Regurgitations of sourness. Acidity in the afternoon. An unpleasant sickly feeling in the stomach. Nausea. Incessant vomiting, with fulness in the head. Stiches in the stomach from coughing. Diarrhœa immediately after eating or drinking. Regurgitation of food. Extreme nausea. Vomiting of food soon after a meal, and craving appetite immediately afterwards. Sensation of hollowness in the epigastrium. Heartburn. Burning in the stomach. Belching of hot wind, which is very sour. Gastric affections, attended by depression of spirits.

Abdomen.—Fullness in the right hypochondrium with flatulence. Stiches in the right hypochondrium, worse whilst eating. Sensation of weight and dragging in the left hypochondrium close under the ribs. Retraction of the abdominal muscles. Pain in the bowels at daylight in the morning which is relieved by external warmth, and by lying on the side and bending forwards, but is aggravated by lying on the back. The pain at first is attended with coldness, which is followed by heat and warm perspiration. Heat in the bowels accompanying the inclination to go to stool. Twisting pain in the right hypochondrium accompanied with heat. Chronic disease of the liver attended with costiveness.

Stools and Anus.—Diarrhœa early in the morning and in the forenoon. Evacuation of green stools in the morning. Natural stools in the evening. Evacuations in the morning attended with strong urgings in the abdomen, with heat and pain in the anus. Sensation of mucus in the anus. Prolapsis ani of long standing. The bowels descends from a little exertion which is immediately followed by stool or a discharge of thick transparent mucus, or it is yellow and mixed with blood. Occuring most frequently in the morning. Six to eight stools a day. Constant pain in the back, worse during evacuation and particularly when beginning to move after stool. Stools consisting of a darkish yellow mucous which smells like carron.

Cholera Infantum.—Frequent chalk-like stools which are very offensive. Blueness below the eyes. Frequent gagging and incessant thirst. Sticking pain above the pubes, and in the course of the left spermatic chord.

Cough accompanied by remittent fever. Pains in the chest and in the sides. Palpitation of the heart. Sensation in the chest as if the heart were rising up. The sensation ascends to the throat. Deep inspiration. Sighing.

Loins.—Pain in the small of the back when walking or standing, with the sensation of the back bending inwards. Pain in the back increased by a misstep, or walking over uneven ground. Pain and weakness in the left hip, like rheumatism from cold, which is increased by going up stairs.

I am indebted to my friend, Dr. Jeanes, of this city, for a number of the foregoing symptoms, and much valuable information about *Podophyllum peltatum*.

W. WILLIAMSON, M. D.

Philadelphia, April 10, 1844.

ON THE USE OF
CUPRUM ACETICUM (ACETATE OF COPPER),

BY DR. G. SCHMID,
OF VIENNA.*

This is an important welcome, and frequently serviceable medicine, even in cases where there is great danger to life.

The following is merely a contribution towards a proper knowledge of its powers, and the method of availing ourselves of these in diseases; or rather only the *material* to serve for the pharmaco-dynamics of this substance. It is more my intention to draw the important features of the picture, which may be recognized under different circumstances, than to determine the fundamental condition, of which these features are the symptoms. Did I wish to do the latter, this essay, not to mention the difficulties attendant on the subject, would grow to the dimensions of a monograph.

In order, as far as it is possible to attain the object I have in view, I shall observe the following arrangement in my remarks:—

I. The diseases in which this medicine is indicated.

II. The pathological state against which it is indicated, is developed not unfrequently in other serious diseases, which may prove dangerous to the life of the patient. I therefore propose, in order to obtain a right conception of the modes of action of this remedy, to make clear and palpable, as well the *relation* of this condition to the primary disease, as the *cause* of this morbid change. In this manner I think I shall be able, most easily and briefly, to place in its proper light, the patho-

logical condition which this substance is capable of producing, as well as curing.

III. Symptoms of poisoning with verdigris. As these seem to differ from the effects of Cuprum Aceticum in diseases, as I have experienced in oft-repeated employment of this substance, I propose, in this essay, to show that the difference is merely apparent. Lastly,

IV. The preparation and magnitude of the dose of this substance must not be left undetermined.

I. The diseases in which this medicine is indicated. The principal diseased state in which I find the Cuprum Aceticum efficacious, is a peculiar and important affection of the brain, which may arise in the progress of several severe diseases. In order to make this affection of the brain recognizable, I shall sometimes describe diseases *in genere*, and sometimes individual cases of diseases, and arrange them in the following manner:—

1. *Acute Eranthemata*. These, as is well known, are frequently checked in the stage of eruption; and often disappear suddenly in the stage of florescence. Sudden death is not rarely the consequence of this. Hence the importance of a remedy which can, with certainty, prevent such a result.

Cuprum Aceticum is, to a certain condition, *specific*; at least it is the substance which, with the greatest degree of certainty, can save the patient. If in this condition, death should happen, it is in consequence of paralysis of the brain.

The dangerous condition which this remedy has most power in relieving, exercises an influence over the *eruption*. The latter is sometimes repressed on its first appearance, and during its further development; sometimes, when at its height, it suddenly decreases, fades, and vanishes. This may happen in scarlatina, measles, smallpox, purpura, &c.; it occurs also in erysipelas of the face. The pulse is

* From the *Hygea*. Translated for the British Journal of Homœopathy.

quick, small, weak, irregular; the temperature of the skin is considerably reduced; in more severe cases it becomes chilly, and covered with perspiration. *Affections of the nervous system are never absent*; to these belong convulsive movements of various parts of the body, distortion of the eyes, face, mouth, head, &c.; spasmodic affections of the chest; sometimes even eclampsia; as well as great restlessness, frequent change of posture, sopor, delirium, &c.

In connection with this subject, a very remarkable case of its kind, although it must be confessed, that such an one occurs but rarely, may be stated.

A patient had angina tonsillaris; he was almost cured,—was, in fact, pronounced convalescent. All at once, however, during the night, without any precursory symptoms having been observed, he was seized with an affection of quite a different nature. He was attacked by a paroxysm, apparently of an epileptic nature. It was supposed, by way of explanation, that the contagion of scarlatina was the exciting cause of the angina, which, after the disappearance of the latter, still continued latent in the body, and manifested itself in the above described nervous attack, because the exanthema was never developed. I have observed and treated similar dangerous attacks produced by other causes, and I am of opinion, in consequence of my past experience, that I can safely recommend the Cuprum Aceticum as a specific.

The symptoms occur not unfrequently, unexpectedly, and with surprising rapidity; and if the exciting cause be not speedily removed, it may in a very short time cause death from paralysis of the brain.

Against this state I have formerly employed many substances, which seemed to be indicated; belladonna, hyoscyamus, stramonium, opium, ipecacuanha, ignatia, chamomilla, nuxvomica, veratrum, cocculus, arnica, digitalis,

&c. But all of these failed to prove of decisive or striking benefit; on the other hand, Cuprum Aceticum speedily produced the desired effect. It is my intention to contribute materials which will serve to promote the knowledge of several remedial agents, as regards their peculiar powers, and the diseases in which they are indicated. If I have time and leisure to fulfil my intention, opportunities will frequently occur, sometimes of giving a description of the characteristic varieties of these substances, sometimes of placing these in comparison with different pathological conditions to which they seem to bear analogy.

To return to the diseased state, in which I consider the Cuprum Aceticum specific, for the sake of distinction I must expressly state, that in the above description I do not include the occurrence of an inflammatory disease, accompanying an exanthema, nor the transition of an inflammation into gangrene; *e. g. scarlatina into angina gangrenosa*. These conditions are accompanied by other characteristic symptoms, stand in a different relation to the exanthema, and require other means for their cure.

It is worthy of observation, that when the cerebral affection above described, which usurps the place of the exanthema, is successfully removed, the exanthema again makes its appearance, and runs its well known course.

2. This cerebral affection occurs not unfrequently among children, but in them its course is not so violent, rapid, and dangerous. Accordingly, the symptoms of the disease are somewhat different. I think my object will be most briefly and correctly attained, by mentioning the most prominent symptoms of this condition.

It is no unfrequent event to see this condition in children affected with catarrhal fever or difficult dentition. If it develops itself during one of these diseases, those symptoms

which are catarrhal or depend on difficult teething, become diminished, repressed, or suspended, in proportion to the intensity of the cerebral affection. And, on the other hand, those symptoms of the original complaint which were suppressed or suspended during the continuance of the cerebral affection, when the latter is diminished in intensity, or altogether removed, again show themselves.

I consider the following the most important symptoms of this cerebral affection. In the commencement the children are either cross and irritable, or else they manifest an extraordinary degree of dulness and indifference to what is taking place around them. Their sleep is disturbed and accompanied with much restlessness; as the disease advances, they become drowsy, without being able to sleep; there follows incapability of holding the head erect, and flushing of the face; dryness of the mouth, at first without increase, sometimes even with diminution, of the thirst, which, indeed, is never intense during the whole course of the disease; disgust at food, nausea, sometimes even vomiting; the bowels are generally sluggish, there is seldom diarrhœa; the quantity of urine voided is considerable; the urine itself clear, colourless, or clouded; rigors occur, succeeded by heat; in the beginning they follow each other in quick succession. The heat is generally not very considerable; sometimes, but then only for a short time, burning; perspiration is seldom observed, and is never of long continuance; the state of the pulse is very variable; on the whole it is rather frequent, full, and somewhat irritable; always very changeable, however, in its energy; exacerbations occur towards evening or during the night; it is only then that the inflammatory form develops itself; subsultus and grinding of the teeth appear during the exacerbations; hydrocephelus may be developed from this state.

In order to understand properly the peculiar properties of the *cuprum aceticum*, it is necessary to form a definite judgment of this diseased condition from the symptoms manifested, and this is the best place for entering on this subject. My own opinion is as follows:—every symptom of this condition, as well as the union of all of them, indicate the existence of a sensitive affection of the brain rather than an irritable, although, during the process of the disease, there are manifest endeavours to throw off the malady by increase of action in the blood.

Of all the remedies with which I am acquainted, I know none comparable to the *cuprum aceticum* for producing good effects. Formerly I was in the habit of employing the belladonna; but it either disappointed me completely, or the issue was such that it did not justify the idea of its being a specific. At the time of the exacerbation, especially when the fever takes on the character of synocha, aconite is the remedy indicated, and is not only useful but indispensable. I am in the habit of administering it during the exacerbation alternately with the *cuprum aceticum*.

An affection of the liver may occur along with the above diseased condition, or it may succeed to it. The region of the liver is itself swollen, painful to the touch, &c. I shall not in this place treat of the proper remedial agent for this condition; but it is my intention to do so when I come to speak of *arnica*, which shows itself here as a specific.

3. The predominating cerebral affection, although it be but a transient affection, in which I consider the *cuprum aceticum* as the *remedium princeps*, may likewise occur in *typhus cerebialis*. For the sake of perspicuity and brevity I cite the following case, some of the phenomena of which will be sufficient for our purpose. A patient laboring under *typhus abdominalis*, came under my care on the 20th day of the disease. She had been treated

for 19 days previously by four allopathic physicians, who had made the same diagnosis of the disease. A younger sister of the patient had formerly died of typhus abdominalis. The allopathic physician who had treated the case before me, had at the last visit given the prognosis, that within 48 hours either a favorable crisis or death must ensue.

I administered arsenic alternately with beladonna during 2 days. The day following there was some amendment. *Urinæ crudæ* appeared, which had never before occurred. From this period I treated this case along with Dr. Löwe. There was frequent and copious diarrhœa. China was given alternately with arsenic. The diarrhœa ceased entirely, and for two days the cure seemed to be advancing; it was, however, very evident that the patient was in the greatest danger. During the whole period of the treatment sudden changes in the most important symptoms were observable: in the pulse, in the temperature of the skin, in the fever, in the cerebral functions, &c., so that the hopes of recovery that were at one time entertained were speedily destroyed by an increase of the alarming symptoms.

We prescribed *acid. phosphor. dilut. gutt. X. in ʒiij aq. distil.* This remedy had not yet arrived from the druggist's shop when the patient began to exhibit more evident nervous symptoms, violent twitchings, slight convulsions, &c., which, after one dose of the medicine had been administered, increased to an epileptic attack. This was reported to me, and I arrived in time to witness a second and more violent fit.

In order that this case may be comprehended, I must remark, that at the commencement of the disease the patient was menstruating, which, however, she ceased to do; on the ninth day of the disease, whilst the two first physicians were being changed, the flow of blood towards the head had apparently been imminent, because leeches had been applied

behind the ear, &c.; moreover, strong stimulants in large doses had been employed, as arnica (ʒss) with valerian, opium, and camphor in a mixture, &c.

The attack which I witnessed was a violent one, and lasted for half an hour. I administered *cuprum aceticum*, and was fully prepared to witness the speedy occurrence of paralysis of the brain, and, consequently thereon, sudden death. This, however, did not take place. In the evening there was some fever. The remedy was continued. The most remarkable circumstance in this case was, that henceforth the disease became concentrated in the brain, and produced that condition which Schœnlein (formerly at least) called *typhus cerebialis*, and Sachs, *sensitive inflammation of the brain*. It so happened, however, that the typhus abdominalis receded and became quite latent.

What occurred subsequently in this case does not concern our present subject. On the 24th day after this attack, the patient sank under the complication of her maladies. By the history of this case, I imagined that I could, in the clearest manner, describe the condition in typhus cerebialis, in which the cuprum aceticum is the chief remedy, and, consequently, it may at times be preferred to other medicines which are indicated in typhus cerebialis, such as opium, hyosciamus, stramonium, crocus, ignatia, &c.

I shall devote a separate part of this communication to the consideration of the cause of the conversion of typhus abdominalis into the above-described form, and the relation which exists between these two forms of the disease, which will be necessary to the proper comprehension of the action of the cuprum aceticum.

4. In *delirium* the cuprum aceticum may likewise be of important use, namely, when the above-described affection of the brain is the cause of this derangement of the cerebral

functions, for the determination of which, what we have previously said will suffice.

This delirium occurs frequently towards the termination of several chronic diseases, when all the functions of the body are nearly extinguished. A remarkable case of this kind in a phthisical patient fell under my observation. In this there were regular paroxysms. The most constant symptom was a *fixed idea*, which in one attack continued for a longer or shorter time, and returned at intervals. The phenomenon which I here allude to was developed in the patient at a time when no hope could be entertained of a recovery. What could not fail to strike the observer was the circumstance, that during the paroxysm the affection of the lungs disappeared, and only returned when the attack was over. The fixed idea, which was the cause of great anxiety to my patient, was, that he saw officers of justice who came to drag him before the tribunal, whereat he burst into tears and lamentations like a child. In connection with this idea it may be stated, that he was involved in an affair of law, but for nothing that could by any possibility be construed into a crime. Besides this, the patient saw in the apartment thieves, ghosts, and many lifeless objects, which had no existence in reality. It was with great difficulty that he could be undeceived with regard to these things, and then only for a few minutes.

When the attack was not a very severe one, his ideas seemed confused. Whilst he felt and described some of his ailments accurately, he seemed to have no perception, or an erroneous one, of others. When the attack was of the utmost severity the scene presented was of the most lamentable nature. The patient assumed the sitting posture, conducted himself like one in despair, exhibited excessive difficulty of breathing, terrible anxiety and fits of insensibility, with occasional delirium; sometimes he described his symptoms

accurately, but rapidly. During this time the pulse and action of the heart were very changeable and weak, the skin cool, bathed in cold perspiration, &c.

The remedy which I found most efficacious in this condition was cuprum aceticum, after the employment of which there generally occurred remission of all this morbid condition. Arsenic, the employment of which these symptoms seemed to call for, especially when the attack was most violent, did not justify our expectations.

Here I may remark, *en passant*, that the *cuprum aceticum* is of the greatest utility in those cases of anxiety in which the patient finds it impossible to control himself; he weeps, despairs, &c., whilst the body is cold, and very little benefit is derived from the application of external heat. I shall not enter into a further description of this condition, as that may be learned from the above case.

5. The *cuprum aceticum* should be preferred to opium in the above-described affection of the brain, where it occurs in delirium tremens, although the latter substance has been employed, and vaunted as specific, without distinction, in all forms of this disease.

I may here observe, what is evident from the preceding remarks, that cuprum aceticum must be the best antidote to opium when this substance has produced its well-known action on the brain.

6. The following case will answer our purpose, in place of a description of the disease in general. Cuprum aceticum was the remedy employed. A student, at the termination of his studies, had to undergo an examination. As I afterwards ascertained, he had already been subjected to one examination, but had failed to give satisfaction. He had, he assured me, exerted himself to the utmost in preparing for this examination, working till very late at night; and, in consequence of this hard work and the late hours, during a

continuance of sultry summer weather, he was so utterly exhausted, both in mind and body, that he was quite incapable of making any preparation for this second examination; indeed, he was so ill as to be confined to bed. He had been in this condition for ten days without any medical assistance. His head was particularly affected, so much so indeed, that, to mention one instance, on awakening one morning he found himself under the piano, although he had laid himself in bed the previous night: he had no recollection of how he came there. In the mean time he felt his strength rapidly declining. The slightest exertion brought on profuse and exhausting perspiration; he had no appetite, so that at last he was forced to call in medical aid. The pulse was weak, slightly accelerated, irregular, the skin moist, no increase of temperature, the feet frequently more cool than warm. At times a feeling of anxiety came over him, which he found it impossible to resist; a giddiness in the head, accompanied with internal pain, sometimes causing insensibility; sleep was restless and unrefreshing, with distracting and annoying dreams; diarrhœa having nothing characteristic accompanying it, was present, with other symptoms, which, for a similar reason, I need not describe.

I had treated the patient for six days without producing any permanent amelioration. At last I administered cuprum aceticum, by the use of which the patient completely recovered in three days.

7. Another remarkable case, which may very appropriately be related in this place, was that of a lying-in woman, who was under my care six years ago. This case forms the connecting link between the preceding condition and that which follows, which I will describe under the title of mania. The cuprum was the remedy used. The most important points of this case are still fresh in my memory. It first called my attention to the efficacy

of the cuprum in similar diseases. A notice of the principal features of this case will answer our purpose. The patient had been delivered some eight days previously but I cannot be precise on this point. About this time she came under my care. From the time of her delivery an obvious alteration had taken place in her perceptive faculties, which, at the time I was called in, were in a very abnormal condition. This woman, who, before as well as afterwards, was of a retiring, timorous, anxious disposition, exhibited a great degree of liveliness when labouring under these delusions, none of which continued for any length of time, but was quickly succeeded by another; to be sure the same frequently returned, but without any connection or regularity; they were in general of an anxious character. Sometimes when, after an attack, she was supposed to be quieted, and was left for a moment, she unexpectedly jumped out of bed, and it required a great force, at times, to retain her in bed. Her eyes were staring, and her look was generally vacantly fixed upon some object. There was very little alteration in the circulation; the temperature of the skin was only slightly elevated. This was the case particularly in the head; in the extremities it was sometimes even lowered. I had tried several remedies in this case without effect; among these were belladonna, hyosciamus, and stramonium. In despair I at last administered the cuprum, in the choice of which neither experience nor confidence in its efficacy directed me. So much the more striking and remarkable was the good effect which speedily ensued. The patient made a rapid recovery under the sole employment of this remedy.

8. *Mania*.—If it should be thought that the above case ought to be placed under this head, and regarded as puerperal mania, it would not alter materially the object I have in view in this essay, which is, not to describe the essen-

tial nature of the diseases (*Wesen der Krankheiten*), in which *cuprum aceticum* ought to be used, nor yet the essential nature of the action of this remedy, but merely to make the phenomena produced by both serve as a guide for its employment.

The following is a case which may with great propriety be introduced in this place. Mania occurred *after the disappearance of an erysipelas of the face*. When I saw the patient, the erysipelas was still perceptible. She lay profusely bathed in an exhausting perspiration. The temperature was elevated; the pulse quick, weak, and irregular. There was palpitation in the precordial region, and extraordinary anxiety, so much so, that the patient had no control over herself. The intellect was still undisturbed. Belladonna and hyosciamus, which were administered, were of no avail. On a sudden the scene was unexpectedly changed. The patient no longer recognized her acquaintances, not even her husband and son; began to speak a great deal of nonsense, which was occasionally highly ludicrous. She would then appear as if absorbed in thought, out of which state of abstraction, however, she was roused on any thing being done about her person. The same thing happened when any resistance was offered to her attempts to get out of bed. She had several very violent attacks, especially during the night. If any attempt was made to administer medicine to her, she resisted strenuously, and ground her teeth with greater vehemence at this than at any thing else. The erysipelas had by this time completely disappeared; the pulse was slower, and not so weak, but still irregular. No more diaphoresis, and the temperature of the skin normal, except that the lower extremities were rather cold.

Stramonium had already been administered without producing any good effect. Being called twice to see the patient during the night, I gave *cuprum aceticum*, which, during

the day following, was alternated with stramonium.

The disturbance of the intellect soon ceased during the alternate administration of these two remedies. For my part, I attribute this effect to the *cuprum aceticum*. From my subsequent and present experience, I am inclined to think that stramonium was not indicated in this case.

I may remark, as proving the efficacy of the *cuprum aceticum* in this case, that the erysipelas reappeared slightly in the face, and not till then did the cuticle fall off.

With regard to the *alternate employment* of two substances for the cure of diseases, I may here observe that it is sometimes very advantageous, and not unfrequently absolutely necessary. I myself am in the habit of doing it; but certainly it is easier to fall into the error of doing too much than too little; besides this, there is a disadvantage attending it which may lead to a want of certainty in practice, namely, that it is a matter of great difficulty to determine what merits each of the medicaments had in the cure. In this I acknowledge an error into which I have frequently fallen, but from which I am gradually emancipating myself. The more my experience in diseased conditions and their apparent specifics increases, and the more frequently repetitions confirm these as specifics, so much the more simple, decided, and certain has become my practice, which is to me a source of infinite satisfaction.

I merely make these remarks *en passant*, as it is my intention, in the course of this essay, to devote some part of it to a statement of my views and experience with respect to the efficacy and necessity of an alternate employment of medicines in diseases.

9. *Apoplexia nervosa*.—In several severe diseases we frequently observe slight attacks of this nature, in which the *cuprum aceticum* is the best remedial agent. Consciousness

is lost; the face is distorted with convulsions; the mouth drawn to one side; the tongue partially paralyzed and awry; speech impeded or completely lost; one extremity, generally an arm, moved with greater difficulty than the other, &c. Such a case I witnessed in a phthisical patient. The *cuprum aceticum* speedily procured relief. It was remarkable, however, that while these symptoms continued, the cough and other pectoral affections ceased, and only reappeared after the fit was over.

10. I may here introduce another case in which *cuprum aceticum*, alternately with stramonium, was used with success. I shall give this case briefly, and relate merely the most important features of it, as I have them now in my recollection. For the sake of connection, it will be necessary to mention some important circumstances in the history of the disease.

The patient was previously of rather a corpulent figure, subject to profuse perspiration, had frequently a cough, which continued for a long time, and was with difficulty removed; he was often troubled with obstruction of the bowels, and thereafter diarrhœa; he was hypochondriacal, but nevertheless a zealous hard-working officer. His disease had already existed for several years, with occasional remissions, during which he frequently felt quite well, and even gained strength. For three successive years, during the cold damp weather in autumn, after having, in general, suffered some time previously from a catarrhal affection, he was seized about the middle of the night with a peculiar attack, which recurred frequently during the winter. It awakened him suddenly out of his sleep; he found great difficulty in breathing, and was obliged to sit up, and lean forward very much, whereby he experienced some relief. He had frequent calls to make water, of which he passed a large quantity, which was clear and pale-coloured. The lower extremities were cold,

the pulse spasmodic, but not weak. If the pulse became feverish, and general warmth, with slight transpiration pervaded the skin, in that case the difficulty of breathing was diminished, and the cough returned, accompanied with a frothy expectoration, difficult to bring up, and tinged with blood.

The medical man who attended the patient in these asthmatical attacks, before I saw him, was accustomed in such circumstances to open a vein, which was immediately followed by relief. In my hands other remedies proved efficacious in relieving the attacks. It was not until after I had witnessed several such attacks that I discovered, whilst examining the precordial region during a fit, a strong pulsation which could not be completely overcome by a firm pressure of the finger, so that conjecturing that the cause of the fits and the subsequent condition lay here, I had recourse to crocus, of the tincture of which I administered from 3 to 5 drops per dose, at intervals of a quarter, a half, and one hour; and by this means I succeeded in relieving the attack and its consequences more quickly and completely, than by any of the remedies I had previously employed. Calcareous tubercular masses were frequently ejected during the cough, which was very often exceedingly obstinate.

The above is *one* point of importance in the history of this patient. I shall now give another. In summer, especially in sultry damp weather, he always suffered from attacks of obstinate and exhausting diarrhœa, from the effects of which he recovered in two or three days after it had ceased; he then regained his appetite, and his digestion became good. When the cholera prevailed in Vienna, during the summer of 1836, he had an attack of it, from which he likewise speedily recovered.

Passing over some less well-marked and less characteristic particulars in the history, I shall proceed to give a sketch of the condition of my patient, during which, the attack

that we are more particularly interested in, took place. Immediately before this, however, he was attacked by dropsical symptoms, beginning in the lower extremities, and spreading upwards to the chest; hydrothorax was apparently commencing. Although the life of the patient was threatened, yet he was at last relieved by the employment of digitalis and scilla in large doses, which succeeded after many other remedies had been used in vain. From six to ten grains of digitalis were administered in infusion, after I had employed, without effect, the undiluted tincture in doses of several drops.

There remained, what had indeed existed before the dropsical symptoms, oppression in the scrobiculus cordis, pulsation of the aorta, obstinate obstruction of the bowels, feverishness, &c. This state was also relieved, the appetite returned, which indeed sometimes became ravenous, and then he generally indulged it, though he always suffered afterwards from his imprudence. During this frequent alternation of recovery and relapse, it so happened, that at last the patient was observed to be sometimes sunk, as it were, within himself, and staring vacantly before him. His memory became remarkably impaired. One day after dinner, although he had previously felt quite well, and indeed had been walking about, he suddenly fell down in an insensible state, and was seized with convulsions. He had no consciousness of what happened to him during the fit, nor recollection of it after it had left him, which took place in a day and a-half afterwards. During the fit the convulsions recurred several times, when he ground his teeth, and his mouth filled with frothy saliva, which he frequently spat about him; swallowing was a matter of difficulty, and sometimes impossible; the respiration was laborious. After lying for some time quietly sunk in deep sopor, he would waken up, and toss himself so violently about in bed,

that means had to be used to prevent him injuring himself; then he would start up suddenly in bed and assume a sitting posture; he could not, however, speak. The skin, which was previously cool, became warm all over,—the pulse, which before was very variable, became pretty frequent and strong. With considerable difficulty he vomited the food which he had recently partaken of. These fits recurred several times. At last all these symptoms gradually disappeared,—tranquil sleep followed, from which he awoke in the full possession of his senses; he regained the power of speaking, and was not a little surprised at the anxious and retiring deportment of those about him. He did not suffer from any more such attacks, and his intellectual functions became as normal as before the fit.

For the cure of this state, *cuprum aceticum* was employed, at first alternately with stramonium, and latterly by itself, with most satisfactory results. The medicines which had been previously administered had not proved of the slightest benefit. After this attack the former complaint returned, of which he died some time afterwards. An account of the appearances observed on dissection is unnecessary in this place.

11. *Tussis convulsiva*.—I shall not allude here either to the catarrhal, nor to the secretive, but only to the *nervous* stage. It is well known that the whooping-cough, especially in this stage, does little credit not only to allopathy, but for the most part also to homœopathy, for which reason it is rather a sore subject; so that a remedy which shall be efficacious in it, even although only under certain circumstances, must be so much the more welcome. As such, I consider and beg to recommend the *cuprum aceticum*, more particularly when the paroxysm terminates in convulsions. I am not able, however, to decide, whether it should be preferred to all other remedies which have

been recommended and exhibited in the nervous stage of hooping-cough. I have not yet sufficient data to go upon, in order to draw a comparison between them and it. Certain it is, that these remedies have each their corresponding stage, and this must be particularly attended to in their administration, if we wish to clear up the present confusion in the treatment of the disease. Thus, for example, belladonna is particularly indicated in the catarrhal stage, hepar sulphuris is the secretive stage, veratrum in the transition stage from the nervous into the secretive, when the violence of the cough begins to diminish, &c.

; In order that what I have just said may not be misunderstood, I must here observe, that I do not by any means intend to say that it is absolutely necessary for hooping-cough, when it has once begun to pass through all these three stages, before it is eradicated; on the contrary, I am convinced that it may be cured in any stage in which it comes under our treatment, and that without even passing into the succeeding stage. Thus, to adhere to the above arrangement, belladonna may effect the cure in the catarrhal stage.

By the employment of *cuprum aceticum* in the nervous stage (when the disease had already reached this stage, before it came under my care), I have obtained in some instances such good and surprising effects, that, after it had been administered for *one day only*, the disease was checked, and no other medicines were necessary. These were, it is true, the most successful cases; and from them I do not wish that any one should be so sanguine as to expect that the remedy is able, in most instances, to accomplish such a speedy and brilliant triumph. This, however, I observed, that the cure from this time forwards advanced rapidly; and such a favourable change took place, that other remedies were now used with success, which had previously been inefficacious.

I have thus, I conceive, partly pointed out, and partly hinted at, the most important uses of the *cuprum aceticum* in diseases. Any other circumstances, within the above-mentioned sphere of its action, which I have not touched upon, may, I think, be deduced from what has been said.

There is only one other circumstance in connexion with this subject, which I shall endeavour to explain. On looking over the diseases and individual stages of diseases, in which I consider this remedy, in the circumstances already pointed out, as particularly indicated, it appears to me that I must defend it from some objections which might be brought against it, apparently with reason. I allude to the following. As I have in some cases positively stated, and in others let it be concluded, that some of the patients to whom the *cuprum aceticum* was administered in this specific remedy, nevertheless, it may be said, "What good, then, has your vaunted remedy done?" The answer is self-evident. It is this—The condition for which the *cuprum aceticum* was employed did in reality give way. In order to eradicate the remainder of the disease, other remedies are required.

It is now our business to find out the connexion of these different morbid conditions. This subject, on account of its importance, in a practical point of view, merits a separate consideration.

2. *The relation of this morbid state to those diseases in which it is developed, and the cause of its development.*

We have here two points offered for our consideration, of vast importance in practice. *1stly*, The *relation* of the new morbid condition to the primary one; and, *2ndly*, The *cause* of its sudden and often dangerous development.

1st, The two morbid conditions cannot co-exist; whichever of the two prevails, the other is kept in obedience, and concealed.

This, as every physician knows, is the case with many other diseases : thus, the progress of phthisis is checked during pregnancy ; the same is sometimes effected by epilepsy ; on the cessation of these two conditions, the phthisical again obtains the mastery. Professor Rokitansky relates an interesting example, confirmatory of this subject, in the xviiith vol. of the *Medicinische Jahrbücher des österreichischen Staates*, where abdominal typhus and cholera mutually excluded each other. In like manner, one disease may cease by being transformed into another. Thus, the cholera has been observed to pass into intermittent and nervous fevers.

2d, We come now to the consideration of the cause of this change of one disease into another. In the disease with which we have to do, this change takes place according to the laws of contagion ; for when one organ becomes affected, the other is relieved. Although it is possible that such a change may be produced by bad diet, an erroneous system of regimen, or an ill-adapted mode of treatment ; yet, in our case, I consider it as an accidental condition, produced by the diseased organism, which, being too weak to resist the violence of the disease, and in danger of succumbing, transfers the burden to another structure. The fate of the patient depends upon whether the newly-affected structure be more or less important than the former one. The change of disease we have described occurs most frequently, in the most active stage of exanthematous diseases, viz., in the stage of eruption and florescence. In phthisis I have never observed it until towards the close of the disease. It is impossible to ascribe this change to a medicinal aggravation, because it happens in all sorts of treatment, among every description of physicians, some of whom, indeed, adopt a treatment more of an expectant than a positive nature. It may be ascribed to bad treatment ; but even if so,

it does not necessarily imply that it was produced by the administration of a certain medicine. We now come to the third point which we promised to treat of in this essay.

3. *Comparison of the action of the cuprum aceticum in the above-mentioned diseases, with the poisoning by verdigris.* In the preceding articles, I have endeavoured to show the peculiarities of the cuprum aceticum, by describing the diseases in which I have used it with great, sometimes with extraordinary, success ; it now remains for me to illustrate further these peculiarities, in the action of the substance on the healthy subject, when administered accidentally or purposely ; and so much the more do I feel called upon to do this, as the latter will be rightly held to be the *prius*, and the former as the *posterius*—in other words, the latter will be to the former as the *proof* to the sum.

It may be said, that the symptoms of poisoning by verdigris, a large number of which are known, and some of which Orfila has collected in his work on Toxicology, should answer our purpose. This is not, however, the case ; and this is the reason of my calling attention to the subject. The difficulty is this : *The symptoms of poisoning by verdigris do not certainly stand in opposition to the account I have given of the peculiar properties of cuprum aceticum, but, at the same time, they do not speak in favour of it ; so that nothing can be either confirmed nor inferred from them.*

For the proof of this, and at the same time for the purpose of making a satisfactory deduction from it, I must first mention the symptoms of poisoning by verdigris.

1. Orfila, in his Toxicology, reduces the symptoms of poisoning by verdigris to the following :—

An acrid, styptic, coppery taste, dryness of the tongue, feeling of constriction in the throat, coppery eruptions, continual spitting, nausea, copious vomiting, or vain efforts to

vomit; tearing pains in the stomach, frequently very violent; dreadful pain in the abdomen, frequent calls to stool, the matter passed being sometimes bloody and black coloured, with tenesmus and weakness, tympanitic and painful abdomen; small, irregular, thready and accelerated pulse, faintings, natural warmth, burning thirst, laborious respiration, anxiety in the pit of the stomach, cold perspirations, scanty urine, violent headache, vertigo, prostration of strength, weakness of the limbs, cramps, convulsions, and lastly, death.

2. These symptoms of the poisoning by verdigris do certainly not indicate the morbid condition, which I have endeavoured to depict and make comprehensible in this essay; on the contrary, they indicate *an inflammatory and gangrenous affection of the mucous membrane of the digestive apparatus, more especially of the stomach and intestines*. A post mortem examination affords decisive proof of this, as we then find the mucous membrane of the stomach and bowels in an inflamed and gangrenous condition, in which sometimes the other tissues of these organs participate; when this is the case, sphacelated spots are produced, which easily give way, when perforations are produced, through which the contents of the intestinal canal are discharged into the peritoneal cavity. It sometimes even happens that the rectum is ulcerated on its inner surface, and perforated in several points.

If, as I conceive, my observations with respect to the action of *cuprum aceticum* be free from error, and if, as I cannot for a moment doubt, the account given by Orfila of poisoning by verdigris be correct, *how*, it will be asked, *can my observations be reconciled with Orfila's account?* This question naturally presents itself, and it is my duty, in this essay, to answer it satisfactorily. I therefore attempt to do it briefly as follows:

a. In order to form a proper judgment of the effects of *cuprum aceticum*; we must dis-

tinguish two forms of action. The object of this essay has been to indicate and explain one of these, the other is shown in cases of poisoning with verdigris.

b. These two forms are opposed to each other, or, in other words, the one excludes the other. After what I have brought forward, in a former part of this treatise, concerning the manner in which one disease suppresses another, this point can no longer be a matter of doubt. Besides this, *cuprum aceticum* has this property in common with several other substances, and that in a very evident manner. For example, this is the case with *secale cornutum*. It is a well known fact, that frequently dangerous and widely-spread epidemics prevail, in unpropitious seasons, from the use of diseased rye, called *secale cornutum*. This disease is termed *morbus cerealis*. It has, however, been observed that some of the affected exhibit principally *nervous symptoms*; while others again, are attacked by a gangrenous affection, so that two forms of this disease are described, the convulsive and the gangrenous. The same is the case with *cuprum aceticum*.

c. We do not require to enter further into this subject; it will be useful, however, to note what circumstances produced the one form and what the other. As regards this subject, Orfila says that the ergot of rye, when partaken of in small quantities, produces nervous symptoms—the convulsive form, whilst single large doses, or long continued employment of it, produced the gangrenous form.

To return to the *cuprum aceticum*. I know no other way of accounting for the production of two forms of disease by this substance, than by ascribing it to the difference in the size of the dose. In cases of poisoning with verdigris, large doses were administered, and produced an inflammatory condition of the mucous membrane of the stomach and bowels, with a tendency to gangrene. In those cases, the

whole strength of the substance, in consequence probably of the largeness of the dose, was so fixed, as it were, that it was unable to produce any action on the brain and spinal cord, for which organs it had an equally specific affinity.

d. There is another point to be attended to, which, although of paramount importance, is rather out of place here ; it is this, that large doses of a remedial agent are not well adapted to give us a proper knowledge of its peculiar properties ; they attack the organism with great vehemence, and it, thus assaulted, exerts all its powers to ward off the attack, the conflict thence arising produces a very chaos of symptoms. In illustration of this point, I need only allude to purgatives, emetics, and diaphoretics.

IV. *Preparation and dose of the remedy.* An explicit account of the methods I adopt, in so far as they differ from the general practice, forms part of the object of this essay. I proceed thus : I triturate one grain of the *cuprum aceticum* with 100, 150, or 200 grains of sugar of milk ; the latter must have been previously triturated, so as to feel as fine as flour. In this state it must be gradually rubbed up with the remedy. They may be equally and perfectly mingled in from 20 to 30 minutes. Of this I take, upon the point of a knife, a quantity weighing from 3 to 4 grains, and dissolve it in a tumbler of spring-water ; this is to be used in tablespoonfuls, every $\frac{1}{4}$, $\frac{1}{2}$, 1, or 2 hours, according to the violence of the disease. I am in the habit of using this remedy very frequently, and I have *never* observed a patient get worse in consequence of its administration, not even among children, in which class of patients it is, if not an indispensable, at least a most useful remedy, in the above described cerebral affections.

I imagine I have said sufficient in this place with regard to the preparation and dose of this substance, the more so, as I intend, in a special essay, to give my views and experience

on these subjects more fully than I have now done.

There is still another circumstance in connection with this subject which merits a place here. It is this — In the above affections I have tried the *cuprum aceticum* only ; I have never instituted any experiment to ascertain whether the *cuprum metallicum* may not have the same effect, although it is my intention to do so as soon as possible. From analogy, however, I conclude that the result of these experiments will prove that the action is not *quite* the same. I may *en passant* mention my reasons for such a supposition. Of mercurial preparation I have employed the *mercurius vivus*, the *solubilis Hahnemanni*, the corrosive sublimate, calomel, the *hydrargyrum precipitatum rubrum*, the nitrate of mercury, and I have found that there is often an essential difference in their effects.

MATERIA MEDICA.

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CHAPTER VI.

While it has been shown, in the preceding portions of this essay, both from the reasonableness of the proposition itself, and the recorded sentiments of medical writers, that **EXPERIENCE** alone can guide us truly in estimating the curative properties of remedial agents ; it has also been proved that the *so-called* experience of the dominant systems of medicine, is fallacious in principle and has been insufficient in practice for the great object sought. This proposition, like the first mentioned, was found to be fully sustained by the admissions of the most accurate writers

in the profession. It remains to be shown in this concluding chapter, how the deficiencies of preceding attempts to secure the acknowledged advantages of an experimental acquaintance with the *materia medica* can be supplied, and the mode of conducting such an enquiry established upon a true basis.

Though we deny that the experience and observation of the medical profession have hitherto accomplished anything like the results that might have been effected under the guidance of a sounder philosophy, we are, at the same time, willing to allow full credit for all that "the experience of three thousand years" (of which we have lately heard so much) has really discovered of the relation of drugs to the human organism, either in a healthy or diseased state. A physical truth is equally *true*, by whatever means discovered, or upon whatever principle explained. It belongs to science, and not to a particular system. Whether it is the result of accident, the guidance of a false theory, or of pure observation, cannot be essential to the validity of an established fact. Whatever, therefore, has been discovered by the researches of all previous ages, must be received and acknowledged by the present and the future. We only wish it was in our power to acknowledge a greater amount of positive truth. One fact, at least, has been demonstrated by the history of medicine; that with all its multitude of systems and theories that have followed and superseded each other, the healing *art* yet remains in a very imperfect state.

But we have dwelt sufficiently, perhaps, upon the defects and fallacies of the *materia medica*, and particularly, upon the ordinary modes of acquiring therapeutical experience. We propose, therefore, before entering further into the principal object of this chapter, to take a brief survey of the more favorable aspect of the subject referred to, and to consider

what has been actually accomplished towards the perfecting of the *materia medica*.

As stated in the last preceding chapter, the chief source of medical experience has hitherto been the trial of drugs upon the sick. The other modes mentioned, viz., observation of the effects of poisons upon men and animals, accidentally or purposely administered, are scarcely acknowledged as legitimate means of acquiring a knowledge of the *curative* powers of these substances. To the toxicologist, the study of the effects of poisons has been a subject of interest, and it has been pursued with laudable diligence and reasonable success, both for the purpose of instituting correct diagnostic principles, and the discovery of efficient antidotes. But the therapist has seldom drawn from this rich mine of facts. They have been studied as *poisons*, not as *medicines*.

The positive results of ordinary medical experience as to the nature of drugs, from whatever source derived, amounts, then, principally to this,—that some are proved to have the effect of increasing the alvine evacuations; some induce a greater or less degree of nausea and vomiting; some are exciting and stimulating, others are sedative and narcotic; some are astringent; others are relaxing; some promote the secretion of urine, others affect in the same way other secretions, as the saliva, perspiration, &c. These prominent effects of drugs have been sufficiently ascertained, and all medical systems admit them as true, although they still differ widely as to their relative or comparative use in the treatment of particular diseases. In systems of the *materia medica* generally, the different substances employed in the practice of medicine are arranged in groups or classes, with reference to their power of producing one or other of these effects upon the system. Upon this, it may be remarked, firstly, that although the different drugs may be correctly designa-

ted by the terms cathartic, diuretic, emetic, sedative, &c. ; that is to say, they do ordinarily produce effects described by these names, yet these are, by no means, all the effects they are capable of exciting, or commonly do excite in the human organism. Consequently to characterize a medicine by only one of its symptoms, and that not always the most important, is calculated to convey a false impression of its use and value, and lead to irreparable mischief, particularly in the hands of the young physician. Some are admitted in the books to cause more than one impression and are accordingly enumerated under several heads ; such are found among those called emetics, which are also, under many circumstances, cathartic in their operation, some are cathartic and also increase the secretion of urine, (diuretics,) and some are repeated in a still greater number of groups. So that while the medical system-makers abandon in some sense a fundamental principle, they retain enough of its application to exhibit an evident inconsistency, and to bewilder the student. Besides the symptom or symptoms which are supposed to characterize a particular class of drugs, each several article in that class will, on trial, be found to produce a great number of symptoms that distinguish it as much from those with which it is associated as from those of any other division.

Secondly, we observe, that while experience teaches that drugs act respectively as emetics, laxatives, &c. ; and though we should admit that these expressions characterize with sufficient accuracy the general operation of different medical agents, we still require a further experience to determine which of these effects it is desirable to bring about, in any particular sickness. And this is the rock upon which the members of the rational schools split. As the application of this partial experience to the treatment of disease, is made chiefly on hypothetical principles, schools and systems

differ in their therapeutics as much as they do in their pathology. While one, for example, considers emetics as highly appropriate and necessary in fevers, another teaches, that as, according to his theory, all fevers are referrible to inflammation of the stomach, emetics must necessarily aggravate the proximate cause of the disease, and are therefore inadmissible. Similar examples might be cited from the treatment of every disease. As medicines are supposed to act favorably upon the diseased organism, not by any direct relation to the disease, but by virtue of their power to excite some particular impression, the indications must, of course, vary with the changing views of medical men as to the nature of diseases. When peruvian bark removes an intermittent fever, it is understood to effect the cure by means of its *astringency* and bitterness. When opium is used in the same disease, it is to secure the benefit of its *sedative* operation, and arsenic removes the same morbid condition, so the books assert, by virtue of its *tonic* power.

There is, however, a small class of remedies now very generally acknowledged, "which do not appear," in the views of many authors, "to act so much through the medium of an indirect impression as by some peculiar specific relation to the morbid condition."

As examples of this class we have mercury in syphilis, sulphur in the itch, iodine in scrofulous tumours, and a few others, which although presenting no particular resemblance to each other in their effects, are commonly grouped together, merely for the reason that their operation cannot be satisfactorily explained on any of the general principles that are deemed sufficient in other cases. There are not wanting, it is true, those, among medical writers, who deny the existence of any specific remedies, and who assert that the *modus operandi* of all drugs is to be determined on some of the generally allowed principles

of therapeutics. Accordingly, they distribute the members of this class (recognized by most authors as alternatives, specifics, alliotics, &c.,) to the other classes; not, however, without straining the analogy, in most cases, to an extraordinary degree. Although this class of remedies, when considered as a *class* by writers on the materia medica, is a small one, yet the thorough searching of the records of medicine set on foot by Hahnemann and his disciples, has brought to light very many instances of a similar application to practice in the management of remedies usually reckoned as belonging to other groups. Instances could easily be stated in which a certain drug has maintained its reputation as a remedy for particular morbid conditions, through many revolutions of theory—successive therapeutists retaining the well proved medicine, but explaining its beneficial operations in accordance with their several favourite systems. It had been fortunate for the progress of the healing art, if the theorizing of medical system-builders had always left untouched, in like manner, other well established lessons of experience; but, as we have formerly shown, one of the most efficient causes of the retarded state of the materia medica, has been the disposition to appropriate facts to the support of a theory, or to reject such as do not accord with the preconceived notions of the dogmatist.

Such examples as have just been referred to, may very properly be included in the number of specific remedies, notwithstanding their claim to that position is not admitted by the modern “rational” schools; and as such we are bound to give them place among the positive results of medical experience.

So much, then, has been established with tolerable certainty, by the long extended experience of the medical world, under all the disadvantages of an imperfect and false philosophy. 1. That drugs are capable of exciting morbid impressions upon the human organ-

ism both in its healthy and disordered state, and also of exciting a healthy action in the diseased system. 2. That there must be a certain relation or affinity between the diseased condition and the remedy in order to effect a cure. (The nature of that relation is a subject of dispute.) 3. That there are some agents, at least, whose *modus operandi* is inexplicable on any of the principles adopted by the founders of medical systems generally.

So little, then, being really known, and settled as to the nature of medicines and their relations to the human organism, and consequently the principles that should guide us in administering them to the sick; and since the admitted modes of ascertaining their virtues are manifestly imperfect, it is surprising that the attention of physicians, or at least, of medical philosophers, should not have been directed to other possible sources of information.

Analogy has sometimes assisted in introducing a poison into the materia medica, its effects having been observed upon the healthy, and its probable uses to the sick inferred therefrom. It would have been natural, therefore, to expect, that the same method of investigating the nature and properties of *other drugs*, would be adapted, in the hope of throwing some light upon this obscure subject. Had the materia medica been studied thoroughly as a branch of natural history, and the effects of every substance which is capable of affecting the human system, been ascertained by experiment upon the *healthy* as well as upon the sick, there can be no reasonable doubt but important discoveries would have been made long ago in the laws of therapeutics, and it would not have been left for the nineteenth century to decide on the truth of the dogma “*SIMILIA SIMILIBUS CURANTUR.*”

We have now arrived at the point to which this essay has all along been directed. If it has been an object in the previous chapters, to

exhibit the imperfection of the materia medica, it has been only for the purpose of making more apparent the greater advantages to be expected from the "better way" of developing and perfecting this branch of medical science, which it is the aim of this journal to advocate.

Although the trial of drugs upon the healthy might be expected, *in some way*, to throw more light upon the nature of their action in relieving or removing sickness, yet it would, of course, be impossible to imagine before hand what might be the result of such a course of experiment. But the fortunate discovery of the law mentioned above, which owes, at least, its first extended application to HAHNEMANN, opens to us at once a firm foundation upon which to build an experience, every portion of which must add to the perfection of medical science.

It is aside from our purpose to prove the existence of that law, but assuming it to be already demonstrated, it must be evident that a great advance is at once made towards the establishment of a purely experimental practice—towards such an experience as must be altogether free from the imperfections of all other modes of prosecuting such an enquiry hitherto attempted. One of the first obvious advantages arising from the discovery of this therapeutic principle, is that whenever the appearance of a new disease renders it necessary to search for its appropriate treatment, a great saving of time, and probably of many lives, is affected by it. If the law of similarity between the pathogenetic and curative effects of drugs holds true, the physician who acts in accordance with that law knows at once where to search for his efficient remedies. No better exemplification of this proposition can be required than the cholera, while the medical profession generally presented the humiliating aspect of indecision and doubt—the different schools disputing as to the nature and essence of the disease, and

the indications to be fulfilled in its treatment, the Homœopathist selected his remedies in accordance with the grand law of *similia similibus* and met the dreaded enemy with a calm confidence which was well rewarded by his peculiar success. Another and similar advantage presents itself in the introduction of a new medicine. A certain article, perhaps hitherto untried, or, at best, used at random, is thought to possess medicinal properties. By its well observed effects upon the healthy, it is not difficult to decide upon its merits and to assign to it its true importance in the materia medica. It is unnecessary to dwell upon its further application to the process of extending and perfecting this most important branch of medicine, or rather medical science generally. This ground is already well occupied by numerous able cultivators, whose efforts are familiar to the readers of the EXAMINER.

It is, however, no slight and hasty investigation of the physiological action of drugs that can satisfy the necessities of the healing art. It can only be a long continued, frequently repeated, and careful experience that will purify and perfect the materia medica—much has already been done under scoffs and sneers and contumely, for which we ought to be thankful; but there remains yet more to be done, not only in extending the range of discovery and observation, but also in arranging and rendering available the already acquired experience.

TRIBUTE TO DR. HARTUNG.

Milan. The Engraver of the Mint in Milan, F. Broggi, has cut a medal in honor of Dr. Hartung, the Homœopathic practitioner of that place. On one side is the Doctor's portrait with the inscription, "*Christoforo Hartung, J. U. Consigliere, etc., etc.*" On the reverse, "*Similia Similibus curantur,*" and "*I clienti ed amici in segno di gratitudine ed amicizia.*"

MISCELLANEOUS NOTICES,

FROM THE

BRITISH JOURNAL OF HOMŒOPATHY.

ON THE TREATMENT OF ABSCESS OF THE
ANTRUM HIGHMORIANUM AND
FRONTAL SINUS.

Dr. Gullon of Weimar, from experience of several cases, strongly recommends arsenic and lycopodium in this complaint. Arsenic generally removes the dreadful throbbing divulsive pain, which assumes the quotidian type for the most part; and lycopodium is useful in arresting the thick yellow discharge which frequently continues after the pain has ceased. Dr. Gullon recommends the higher dilutions of both these remedies, and the use of silica after the discharge has abated.—*Allgemeine Hom. Zeitung*, 24th Bd., No. 2.

SECALE CORNUTUM IN PROLAPSUS UTERI.

Dr. Kallenbach of Berlin relates three cases in which this remedy seemed of great service. In the first case the patient, one of 30 years old, suffered from retroversion of the uterus, when Dr. Kallenbach saw her for the first time. The uterus was replaced, and some doses of belladonna, 2d dil., were given. The uterus was then felt about an inch from the labia inferiora, the membrane around it felt hard, and the rest of the mucous membrane of the vagina was very much relaxed, and gathered into a fold at the lower part. There was much leucorrhœa present. She got first *sepia* and *belladonna* alternately for three months. These medicines lessened the leucorrhœa, and diminished the relaxation of the

vaginal membrane, but the uterus had descended considerably, so as to threaten to become completely prolapsed. In these circumstances, *secale cornutum*, 2d dilution, at the rate of five drops as a weekly dose, was administered. At the end of six weeks, although the patient had been exposed to hard labor, the disease had made no progress; and after other six weeks of perseverance in the treatment, the uterus had ascended half an inch. By continuing in the use of *secale* for fifteen months, a perfect cure was accomplished; the uterus was now barely tangible by the point of the finger; the induration of the upper part, the relaxation of the lower part of the vagina, and the numerous concomitant annoyances, were all removed.

In the second case, the patient had suffered from partial prolapse of the uterus for eight months. It had occurred after a forceps delivery. There was dysuria present, and sense of weight over the pubis, as if the contents of the abdomen would fall forward. On the 10th of April she got *secale*, 3d dilution, two doses a week; and by the 29th of May there was very manifest improvement. The medicine was continued, at the rate of five drops a fortnight, up to the 15th of November, when, on examination, the uterus was found to have resumed its proper position, and she was free from all her former annoyances.

In the third case, the prolapsus was of three months' standing, and there were, besides, frequent severe cutting pains in the abdomen, and occasional nausea. She took *secale* slowly from September to May, when, on examination, the uterus was found to be at least one inch higher, and more firm to the feel.—*Ibid.*

BELLADONNA, EMPLOYMENT OF, AS A PRE-
SERVATIVE AGAINST SCARLATINA.

Scarlatina raged during the winter of 1840 to 1841, in several villages in the neighbor-

hood of Valenciennes. In two of these villages, Saulin and Cargies, possessing a population of from 800 to 900 persons, out of 96 individuals attacked with scarlet fever, 80 died. M. Stiévenant resolved then to try the prophylactic properties of belladonna. Of 250 persons belonging to one of the villages who took the belladonna, all were preserved; whilst out of 50 who did not take it, 14 were attacked with the fever, and 4 died. At Cargies, M. Stiévenant administered belladonna to the children of the district school, permitting them to attend school, and mix with the other inhabitants of the village. All the children thus treated escaped the contagion, whereas some who did not take the preservative were attacked with scarlet fever. The preparation employed by M. Stiévenant was three grains of recently prepared extract to four ounces of eau de canelle (distilled water is much to be preferred), to which was added forty drops of rectified spirits.

The dose of this was as many drops as the child had years, the number of drops, however, not to exceed twelve. It was given from three weeks to a month, and scarcely any perceptible symptoms produced. It was exceedingly rare that he observed headache, dilatation of the pupil, or eruption of the skin.

During the discussion which arose in the Academy upon this memoir, M. Guerant certified, from his own experience, as to the prophylactic properties of belladonna, having found it on many occasions efficacious; and in those who had taken it, but were, nevertheless, attacked with scarlatina, it was of a very mild character.

The memoir was favorably received by the Academy.—*Bulletin de l'Acad. Roy. de Med.*, tom. viii. p. 567. Fév. 1843.

THUJA IN CONDYLOMATA.

BY DR. MOHNIKE OF BERLIN.

The patient had suffered from condylomata for two years; had tried all sorts of means, but in vain. The inner surface of the prepuce, as well as the point of the penis below the corona glandis, were covered with small pointed condylomata. There was a slight discharge of viscid fluid peculiar to the disease. No pain or itching. The whole of the perinæum was occupied by one broad condyloma, which was at least half an inch in height. It was constantly moistened by a slimy purulent discharge. The patient could scarcely bear the pain, especially when walking; and the acrid discharge had irritated the thigh, on the inside of which another small condyloma had formed. The margin of the anus was occupied by three large condylomata. There were no signs of secondary syphilis about him. He had used *Decoct. zittmanni*, and pills of sublimate of mercury, and had applied various escorotics to the parts, but without relief. Dr. Mohnike ordered him various mercurial preparations and caustic substances, but without the slightest effect, although he kept his bed all the time of their application. He then ordered tincture of *thuja occidentalis*, and was astonished at the rapid improvement caused by this NEW remedy, for in three days, the aspect of the parts had altogether changed. In the course of nine days the last trace of the broad condyloma had disappeared, and that without any ulceration but by internal absorption.—*Hufeland's Journal der p. r. Heilkunde fortges: Von Busse*, 1843, March.

[This NEW medicine was used with astonishment by the allopathic doctor in 1839. In a work published in 1810 it stands written—“Hence it follows, that *thuja* must specifically cure condylomata, and experience teaches us that it is the only remedy in this disgusting disease.” This work is Hahnemann's Ma-

terja Medica, vol. v. p. 123, of the second edition. Now, we would ask, whether it is ignorance or dishonesty that prevents the acknowledgment of Hahnemann? Surely in neither case is it creditable to a *Doctor of the healing art*. Eds.]

IODINE IN CUTANEOUS ERUPTIONS.

Dr. Fischer of Fulner, in Moravia, relates the following case of cutaneous eruption cured by iodine :—

A man of 34 years old, of a scrofulous constitution, had for a year suffered from an eruption of the skin. The disease began in the form of small vesicles upon the foot. These broke and left a scab behind; this scab gradually and rapidly spread until it covered the whole circumference of the leg, from the foot to the middle of the thigh, with dark brown hard scaly overlapping crusts, from under which there constantly oozed a greenish yellow thick fluid, of a peculiar smell. An eruption of a similar kind, but of less extent, affected the other foot. He had tried, for a long time, the ordinary medicines for this complaint, without any benefit. He was ordered a pill made of iodine and the ioduret of potash, to be taken internally, and the use of the solution of ioduret of potash externally. His diet was also changed. In the course of nine weeks, the disease had entirely disappeared, and he has continued perfectly well ever since.—*Oester. Med. Wochenschrift*, 1843, Feb. 25, No. 9.

ON CALENDULA IN AFFECTIONS OF THE UTERUS.

Dr. Ockel, after twelve years' experience, concludes calendula to be very useful in hypertrophy of the uterus, which presents the following symptoms :—Sense of weight and fulness of the pelvis; stretching and dragging in the groin; pain in sudden movement. The

os uteri is found lower than natural, considerably enlarged, sometimes occupying the whole pelvis, the walls thickened and hard. Frequently menorrhagia is present. There is also costiveness, and sometimes urinary complaints from the retroversion of the uterus, which occasionally takes place.—*Oester. Med. Wochenschrift*, 1843, No. 14. Extracted from a Petersburg Journal.

POISONING BY LEAD DROPS LODGED IN THE BODY.—BY DR. PLUSKAL OF LOMNITZ.

A robust and healthy youth was shot when hunting. The charge, consisting of about eighty drops, ten of which were large (swan shot), lodged in the inside of the thigh, carrying some fragments of the clothes, and also of a horn drinking-cup, along with them. These foreign bodies, and so much of the shot as could be reached, were removed without loss of time, and the rest left to suppurate out. The suppuration went on as well as possible, but during the process there suddenly occurred, without any known cause, pressive pain under the sternum, dry cough, exhausting fever, with excessive weakness, which could not be accounted for by the very moderate suppuration of the wound. A similar accident befel a country clergyman, much given to the pleasures of the chase. He received a charge of shot in his leg, the drops were scattered and sunk deep into the legs, so that they could not be removed. The wound gave him no trouble, but soon afterwards he became affected with severe enteralgia, to which the patient has ever since been subject, and which has latterly been accompanied by an exhausting fever.

These severe symptoms cannot excite surprise, when it is remembered that to every 1000 pounds of lead used in the manufacture of shot, 10 pounds of arsenic are added to

give it better consistence and firmness.—*Öster. Med. Wochenschrift*, 1843, *Mai* 6, No. 19, p. 505.

LONG LATENCY OF VACCINIA.

BY DR. WENINGER,

Physician to the Elizabethan Hospital, Vienna.

A child of a year old was vaccinated in July 1839. No pustule formed at places where the vaccine matter was applied, but some inflammation round the wounds. In the month of July 1841, the two spots where the matter had been inserted again inflamed, and vaccine pustules formed, which ran their ordinary course, and left two cicatrices, which are still visible.—*Öster. Med. Wochenschrift*, 1843, *Mai* 13, No. 20, p. 536.

PUSTULAR ERUPTION FROM THE INTERNAL USE OF TARTRATE OF ANTIMONY.

Dr. Böckh of Greifenhagen ordered a fisherman to take ten grains of tartar-emetic in solution, in the course of thirty-six hours, for the cure of pneumonia. Scarcely twenty-four hours after the last dose, there appeared an eruption exactly resembling that caused by the external application of the salt. The eruption consisted of small papulæ or vesicles, which rapidly enlarged and became full of pus, and of a deep red colour at the base, so as to resemble mature variolous pustules, and they were very painful. In the course of a few days they became dry and crusted at the top. The eruption appeared first in the inner surface of the forearm, then over the whole back, where the pustules were partly solitary, partly grouped. Neither vomiting nor sweat attended the formation of the pustules, but they were preceded by some watery stools. The cure of the pneumonia advanced most satisfactorily.—*Med. Zeitung von dem Vereine für Heilkunde in Preussen*, 1843, No. 6.

SPURIOUS HYDROPHOBIA FROM REPRESSED ITCH.

Dr. Hirz of Kempen observed the case of a man who, after the itch had rapidly disappeared under the use of red precipitate ointment, was attacked with all the symptoms of perfect hydrophobia, although he had never been bitten by any animal. Means were used to bring out the eruption again, such as rubbing the back with a hard brush, and using artificial sulphur baths, along with the administration of strychnine, sulphur and calomel, and by the use of these means he recovered in three days.—*Oester. Wochenschrift*, 1843, *Jan.* 1.

POISONING BY DIGITALIS.

Dr. Cabaret relates the following case:—A peasant, aged 55 years, took, by the advice of a neighbour, half a glassful of the juice of digitalis purpurea for the cure of an intermittent fever. Severe pain in the epigastrium soon set in, followed by constant evacuations, both by vomiting and stool, of a dark yellow colour and offensive smell, confusion of ideas, giddiness, contracted pupil, cold sweat, universal and partial trembling, and likewise stiffening of the body, bending forward of the body, attended with violent tearing pain in the abdomen, sighing, respiration, difficulty of swallowing, small irregular pulse, and sparing, very painful expulsion of red urine. These symptoms continued six days; in the seventh, the pain subsided, but the patient was stupified, the face livid, the body covered with cold sweat, the respiration more rapid. He died upon the eighth day. On dissection, the stomach was found empty and inflamed at the larger curvature, but more so at the pylorus. The duodenum was in the same state, and a gangrenous spot at its larger curvature. The

whole of the intestines were inflamed and partially gangrenous. The liver and spleen were swollen, and the bladder full of urine. [It is to be regretted that neither the heart nor the lungs were examined in this case.]—*Journal de la Section de Medecine de la Société Académique du Department de la Loire Inférieure*, 18e vol. 7é. Année de la Nouvelle série à Nantes, 1842, 8. Also *Oppenheim's Zeitschrift*, 1843, May, p. 52.

IMPOTENCE CAUSED BY THE SMOKE OF
HYOSCYAMUS.

A married man of 40 years old, who during his student-life had been somewhat dissipated, and contracted strictures by the mismanagement of gonorrhœa, was at the time of the occurrence about to be told, in perfect health and manly vigor. In March, 1842, he was suddenly attacked with violent toothache, worse at night. In order to cure it, by the advice of a neighboring quack, he fumigated his mouth with the smoke from burning seeds of hyoscyamus. The pain instantly vanished, but from that moment he became perfectly impotent. He tried all sorts of applications in vain, and in September went into Prague to consult Dr. Wehle. He was ordered to be very abstemious in every thing, and to fumigate the perinæum with amber, styrax, and benzoen. He also got a great variety of bitter and aromatic substances in the form of a cordial, and whether because of, or in spite of, these applications, he recovered in eight weeks.—*Oester, Med. Wochenschrift*, 1843, Mai 13. Pro. 20, p. 539.

POISONING BY NUX VOMICA.

The patient was a woman of 50 years old, of a weak constitution; she took a teaspoonful of solution of nux vomica, in the proportion one drachm to two ounces of water, and

was immediately seized with vomiting and rigors. The narrator of the case, Dr. Lunhard, found the countenance distorted, the cheeks glowing, the gaze fixed, and the eyes frequently rolled upwards, the pupils contracted, the breathing rapid, groaning, and frequently interrupted; great anxiety, repugnance to all liquids, which she was almost wholly unable to swallow; trembling of all the body, frequent impulse to start up and stagger through the room, as if she had got an electric shock. She frequently screamed unconsciously, and while doing so the hand was drawn back, the mouth opened, the tongue protruded; the shock was interrupted by frequent hiccough; the pulse was small, hard, and quick. Liquor ammoniæ was given as an antidote, and put an end to the symptoms.—*Medic. Zeitung von dem Vereine für Heilkunde in Preussen*, 1842, No. 50.

CONIUM IN SCROFULOUS PHOTOPHOBIA.

This is strongly recommended by Dr. T. Biondi of Bukarest—both applied externally in the form of a plaster over the brow, and administered internally as a watery alcoholic extract.—*Oster. Med. Wochenschrift*, 1843 April 29, No. 18, p. 484.

Hahnemann is receiving at this moment in Paris, those honors due the splendor of his genius. The committee deputed to take measures for this purpose, counts the following among its members: Messrs. Victor Leclerc, Dean of the Sorbonne, Raoul-Rochette, Member of the Institute, Cousin, Peer of France, M. R. D'Amador, Professor of the Faculty in Montpellier, &c.—*Allg. Med. Centralzeitung*, (*Allopathic*) from the *Journal de Montpellier*.

HOMŒOPATHIC TREATMENT
OF AN
OPHTHALMIA
IN THE
PROTESTANT HALF ORPHAN ASYLUM,
OF THIS CITY,
BY CLARK WRIGHT, M. D.

Dr. Wright the able and excellent author of the subjoined report, has given us a copy for publication, because the Managers of the Charity to whom it was officially made, had given him personally the credit which they ought to have given to Homœopathy. It was drawn for the perusal of the ladies, who constitute the Board of Managers of the Asylum, and of course it is but a very meagre medical sketch of the diseases treated. It is to be hoped, that Dr. Wright will publish a proper Hahnemannian detail of the cases, or at least of a few specimen cases, that the whole school may profit by his good experience.

The Board of Managers in their Report to the public, which found place in most of the city Newspapers, say, that they "would here record their grateful acknowledgments to Dr. Wright, (the sole attending physician for the last twelve months), for his unremitting attention to the children, *and for the success which has attended his practice.*"

The most respectable ladies who witnessed the successful homœopathic cures of 107 cases of an inveterate eye disease, and of 137 cases of an equally intractable malady of the skin, both of which had been fruitlessly treated in the common practice by a distin-

guished practitioner of the city for a long time, certainly should have stated the facts openly and boldly. It was easy for them to ascertain whether eye-washes and salves, or any external medication had been applied by Dr. Wright—nothing could be easier, and it was due to Humanity and Truth that they should have at least given publicity to the means of cure which had been blessed with such palpable and beneficent efficacy, instead of ascribing the cures to the professional skill of Dr. Wright when he had uprightly informed them that the credit was not due to him but wholly to Homœopathy.

We could not demand their testimony with such freedom if they had not published a statement which conveys an erroneous impression as to the means of cure. These unfortunate children had been treated in vain for months, by leeches, blisters, mercury, purges, collyria, and various washes and salves, so long and so entirely without success, that the Managers were compelled to try Homœopathy; and the trial was almost immediately crowned with brilliant success; two loathsome and vitiating maladies which had made the Asylum an abode of contagion, were completely eradicated by pure Homœopathy, without a single purge or blister, or vomit, or a grain of mercury, and that too without any change of moral or physical regimen! Why do not the Board report the truth, instead of leaving the public to suppose, as of course they would, that these blessed cures were wrought by some fortunate conjecture of the common practice?

It is proper to state that this Board continue to employ Homœopathy in the Asylum, although they have not in any other way seen fit to testify to its efficacy.

Dr. Clark Wright deserves the thanks of the Hahnemannian School for the manly feature of his report to which we have alluded, and he is moreover entitled to rank in that school as a practitioner of unusual skill.

* Eighth Annual Report of the Society for the Relief of Half-Orphan and Destitute Children. New-York, John S. Taylor & CO., 1844.

REPORT.

On the 11th of August, 1842, I took charge of the medical treatment of the children affected with the ophthalmia in this Institution. Instituting an inquiry into the previous history of the disease, I was informed that it had prevailed with more or less intensity for the last three years: during the whole of that period a large proportion of the inmates had also suffered from obstinate eruptions on the skin, which had several times been suppressed but as often reappeared, either complicated or alternate with ophthalmia.

On examining into the actual condition of the children, the general aspect of nearly all of them was that of bodily and mental torpor; their skin dry, flabby and pale; the eyes of many dull and downcast; these morbid appearances, together with a settled sadness of expression, a disinclination for all juvenile sports, and their sitting about in *silent* groups, so unnatural to healthy children, suggested the idea that disease more than met the eye, was inwardly at work oppressing and paralyzing the functions of the vital organs.

At this time ophthalmia was the predominating disease. Out of 162 children, 53 cases were found requiring treatment, and 20 of these were of an aggravated form, presenting the following characteristics:—Eyelids, inflamed and swelled, some of them entirely closed, others nearly so; a thick crust of adhesive matter upon the margins. The outer coat of the eye-ball red with inflammation—the eye painful, and most intensely so when exposed to light. Four had granulations on the upper eyelids. Five had ulcers on the cornea. In the remaining 33 cases the eyelids were congested, and the external coat of the eye ball slightly inflamed, and constantly suffused with a muco-purulent matter.

Table showing the monthly results of the treatment of Ophthalmia.

When recorded	New Cases	Cured	Left the Asylum	Under Treatment.
1842				On hand 53
August 11th		12	26	39
from 11th to 31st		13	33	19
September,		5	16	8
October,		7	8	7
November,		7	5	2
December,				
1843.				
January,		1	2	1
February,			1	
March,				
April,	2			2
May,		1	1	
June,	2	2		
July,				
August,		5	5	
September,		4	3	1
October,		4	5	
November,				
	New cases 55			
	On hand 53			
Total.	108	107	1	

During the past summer and fall a number of other cases of ophthalmia occasionally occurred, which, however, so readily yielded to a treatment of a week or ten days, that it was not deemed necessary to record them for insertion in the above table. The attack of ophthalmia was generally preceded for 24 or 48 hours by unusual stupor, sleepiness, headache, and some degree of fever. In October, 1842, nearly all those who had recovered from ophthalmia were the subjects of cutaneous eruptions, which, spreading among others, soon in turn became the prevailing complaint, and again threatening to pervade the whole establishment—their treatment for this disease was added to my former charge and now commenced.

The disease first made its appearance on the hands, arms and neck, in large distinct pustules like itch, on other parts of the surface which it ultimately invaded it took the form of a miliary rash. In many cases there was painful erysipelatous swelling of the hands and feet.

A few cases of tinea, impetigo and herpes composed the remaining cutaneous affections.

Table showing the monthly results of treatment
of Diseases of the Skin.

When recorded	New Cases	Cured	Left the Asylum	Under Treatment.
1842				
October,	96	4	2	90
November,	10	3		97
December,	13	5	1	104
1843				
January,	7	8	1	102
February,		8		94
March,	4	6		92
April,	9	10		91
May,	1	40		52
June,	1	53		
July,				
August,				
September,				
October,	1			1
November,				1
Total.	142	137	4	1

General Table of Diseases treated at the Protestant Half Orphan Asylum, during a period of sixteen months, commencing August 11th, 1842, and ending December, 1843.

Diseases.	Cases	Cured	Left the Asylum	Under Treatment.	Deaths
Ophthalmia,	108	107	1		
Cutaneous Diseases,	142	137	4	1	
Pulmonary Catarrh,	24	24			
Influenza,	46	46			
Whooping Cough,	34	34			
Diarrhoea,	29	29			
Dysentery,	11	11			
Inflammation of the lungs	4	4			
Inflammation of the bowels,	1	1			
Chronic Inflammation of the Brain,	1				1
Pleurisy,	2	2			
Croup,	3	3			
Jaundice,	6	6			
Concussion of the Brain,	1	1			
Remittent Fever,	4	4			
Convulsions,	1				1
Marasmus,	3	3			
Scarlet Fever	1	1			
Total.	421	413	5	1	2

REMARKS.

The young children were all exposed to the contagion of scarlet fever, but were immediately treated with the same medicines (as preventives) as those given to the patient, and none took the disease.

There have been two deaths.

Frank Sirat had been for several months an invalid, and latterly became much emaciated;

he was at last taken suddenly insensible and died in forty-eight hours of epileptic convulsions.

The other (*Joseph Brownlee*) died of chronic inflammation of the brain and liver. A post mortem examination was made by Professor Parker, who concurred in the opinion that the disease must have been of long standing, although but recently manifested.

The permanent extinction of the cutaneous eruptions was undoubtedly protracted by the impossibility of separating the children, consequently new cases were constantly recurring. At least *one-third* of the whole number infected had recovered in February and March, in whom it reappeared soon after, but they were not again recorded nor entered afterwards as new cases.

During April and May, as the only alternative *all* the children, the uninfected as well as the infected, partook of similar medicines, after which there was no more recurrence or spreading of the eruption, and it was soon entirely eradicated.

My efforts have been much facilitated by the good order and excellent general management maintained in the Institution and by the neatness and prompt attention in the nursery department.

The general health of the children during the past year has been gradually improving, and they are now all well and in excellent spirits.

There has been no change in ventilation or regimen from former years except the prohibition of pepper with food.

No external medicinal applications have been used.

The medical treatment in every instance has been strictly Homœopathic.

All of which is

Respectfully submitted by

CLARK WRIGHT, M. D.

New York, December 12th, 1843.

ANNUAL REPORT* OF THE HOMŒOPATHIC HOSPITAL IN GUNS, (HUNGARY,) 1842,

BY M. BLESS, M. D., PHYSICIAN TO THE HOSPITAL.

Name of the Disease.	remain'g at the close of 1841.	New cases.	Cured.	Improv'd	Brought in dying.	Died.	Remain- ing.
Abscess	—	2	2	—	—	—	—
Angina	—	3	3	—	—	—	—
Angina with swelling of testicles	—	1	1	—	—	—	—
Tapeworm	—	1	1	—	—	—	—
Abdominal dropsy	1	—	—	—	—	1	—
Variola	—	2	1	—	—	—	1
Hæmaturia	—	1	1	—	—	—	—
Hæmoptysis	—	1	1	—	—	—	—
Furunculi	—	1	1	—	—	—	—
Congestions	1	—	1	—	—	—	—
Colic	—	2	2	—	—	—	—
Inflammation of the eyes	—	3	3	—	—	—	—
“ testicles	—	4	3	—	—	—	1
“ lungs	—	2	2	—	—	—	—
“ spleen	—	1	1	—	—	—	—
“ ears	—	1	1	—	—	—	—
“ pleura	—	4	4	—	—	—	—
Fever, bilious	—	2	2	—	—	—	—
“ bilioso nervous	—	1	—	—	—	—	1
“ nervous (typhus)	1	—	1	—	—	—	—
“ gastric	—	10	10	—	—	—	—
“ bilious with pleurodynia	—	1	1	—	—	—	—
“ brain	—	1	1	—	—	—	—
“ rheumatic	—	4	4	—	—	—	—
“ verminous	—	2	2	—	—	—	—
“ “ with itch	—	1	1	—	—	—	—
Intermittent fever, irregular	—	2	2	—	—	—	—
“ “ with induration of the spleen	—	1	1	—	—	—	—
“ “ quotidian	—	4	4	—	—	—	—
“ “ “ with scurvy	—	1	1	—	—	—	—
“ “ tertian	—	5	5	—	—	—	—
“ “ “ with scabies	—	1	1	—	—	—	—
“ “ tertian with	—	1	1	—	—	—	—
“ “ quartan	—	2	2	—	—	—	—
Lichen	—	1	1	—	—	—	—
Ulcers of the feet	3	1	2	2	—	—	—
Jaundice, with induration of the liver	—	1	1	—	—	—	—
Gout	1	2	3	—	—	—	—
Itch	1	17	16	—	—	—	2
Itch, with gleet	—	1	1	—	—	—	—
Lumbago,	—	1	1	—	—	—	—
Hepatic phthisis	—	1	—	—	—	1	—
Laryngeal phthisis	—	1	—	—	—	1	—
Difficulties of digestion	—	1	1	—	—	—	—
Amenorrhœa	—	1	1	—	—	—	—
Measles	2	—	2	—	—	—	—
Contusion	—	3	3	—	—	—	—
Rheumatism, inflammatory	—	4	4	—	—	—	—
“ “ chronic	—	2	2	—	—	—	—
Dysentery	—	1	1	—	—	—	—
Varioloids	—	4	4	—	—	—	—
Syphilis	1	4	4	—	—	—	1
Phthisis pulmonalis	—	1	—	—	—	—	1
Sprains	—	1	1	—	—	—	—
Insanity	—	1	1	—	—	—	—
Delirium tremens	—	1	1	—	—	—	—
Wounds	—	3	3	—	—	—	—
Panaritium	—	4	4	—	—	—	—
Sum Total.	11	127	126	2		3	7

* From Allg. Hom. Zeitung, Vol. xxiv. No. 12, 1843.

Mortality $2\frac{3}{131}$ per cent.

Since the opening of the institution, (1833) there have been patients

Received . . .	864
Cured . . .	792
Dismissed not cured	5
Improved . . .	11
Brought in dying .	17
Died . . .	32
Remained under treatment	7

864

From a note appended to the above we are happy to perceive that the treasury of the Hospital is also in a most flourishing condition. The Hospital Society besides the uncumbered Hospital buildings themselves, has at its disposal, 38,808 florins.

THE MURIATE OF TIN IN CHOREA.

BY DR. PERSON.

A girl of 11 years old, after a dreadful fright, became affected with headache, and occasional twitches of the angle of the mouth and extremities of the right side of the body, which gradually increased in frequency, until at length they became constant during her waking hours. As the examination of the spine shewed that there was considerable tenderness between the 2d and 6th cervical vertebæ, twelve leeches were applied, and ungt. merc. rubbed in, near the sensitive part, and calomel and zinc powders were prescribed. On the 12th salivation occurred, and the calomel was supplanted by hyosciamus. Leeches were again applied, and afterwards a blister. Notwithstanding these active measures, the disease got worse, and the blister seemed to aggravate the excitement. Upon this Dr. Person determined to try the *murias stanni*, as recommended by Dr. Schlesinger, (Hufel. Journ. 1837), and began with the one-

sixteenth of a grain as a dose, morning and evening, gradually increasing the amount until he gave one-fourth of a grain twice a-day. After the very first small dose, improvement appeared, which almost hourly advanced. By the tenth day, after the patient had taken altogether five grains of the muriate of tin, all the convulsive symptoms were gone, and she was perfectly recovered. This medicine affected the cure without producing any reaction,—it occasioned neither primary aggravation (according to Fischer), nor dryness of the mouth (according to Schlesinger,) but seemed to operate as a pure sedative, quieting the powerful excitement of the nervous system, to which, perhaps, the previous antiphlogistic treatment might have contributed.—*Oester. Med. Wochenschrift*, No. viii. 1843, p. 216.

[Had Dr. Person consulted Hahnemann's *Materia Medica*, he might perhaps have been induced to try the muriate of tin at first, instead of at last; and thus the patient might have been saved the bloodletting and the blistering. He would also have found the occasional aggravations, and the other symptoms of the action of the medicine that have been observed, explained. — EDITORS.] — *British Journal of Homæopathy*.

CARBO VEGETABILIS.

Eugene Tall after having taken one day 20 grains, the second 30 grains, had on the third fluid stools, though usually he had a solid evacuation only every third or fourth day. The subsequent day he took one drachm, a few days afterwards in the morning another drachm, and 10 o'clock A. M. another, after which he had nausea. At 2 o'clock P. M. he took again a drachm after which he experienced again nausea, approaching to vomituration, eructations, fluid evacuation, want of appetite and difficulty of digestion.—*Buchner's Rep.* 43, p. 44, (Allop.)

 REVIEW.

"ON CERTAIN MEDICAL DELUSIONS. AN INTRODUCTORY LECTURE TO THE COURSE OF INSTITUTES, IN JEFFERSON MEDICAL COLLEGE OF PHILADELPHIA."

BY CHARLES NEIDHARD, M. D.,
PHILADELPHIA.

The author, Dr. Dunglison, is a Professor in the above College, and an Englishman. He has become known to the medical world by a number of works on physiology and therapeutics, &c., compiled from European and principally German sources.* In this introductory lecture, he takes decided ground as a rigid conservative, and endeavors to guard the medical class against the influence of new opinions. He depreciates Liebig's discoveries, attacks the obsolete doctrines of signatures, Paracelsus, Reginald Scott, &c., and finally hurls his anathema against Mesmerism, Phrenology, Thomsonianism, Homœopathy and Hydropathy. He is evidently one of those self-sufficient men, who are advocates of the sceptical philosophy, because they have no faith in any thing. According to our opinion it is far more honorable to be the consistent advocate of one system, than the derider of all. The position of such men springs from their self-conceit; which fosters them in the belief, that owing to their superior understanding they are capable of penetrating any new science without preparatory study.

We shall merely quote here what the learned professor states about Homœopathy,

* His work called "New Remedies," is an almost literal translation from the work of Rierke on the same subject.

which no doubt in order to "delude" the public he has mingled with this motley company.

"The people are now ready," he exclaims, "to believe, and many of them do believe, that there are remedies which are capable of inducing a morbid action similar in kind to one that may be going on in the organism, and that these two similar bodies—as in electricity, have a repugnance for each other. An additional branch of this doctrine seems to be that a part is greater than the whole, and that medicines—to be effective should be administered in excessively minute quantities, the decillionth or tenmillionth of a grain of charcoal being an authorized dose." page 27.

"I have not gone into any calculation on this subject, for I consider it unworthy of the trouble, or, indeed, of serious examination, but a recent writer has, who expresses himself as follows: 'The leading Homœopaths of this city (New York) speak of the decided effects of the decillionth dilution; and the lowest Homœopathic dilution to be obtained here of medicines prepared in Germany, is the third, [entirely devoid of truth, for the original tinctures and first triturations may be obtained of any medicine—Ed.] which is very nearly in the proportion of one drop of the tincture to one barrel of alcohol, or one grain of the extract to four cwt. of sugar;' the eighth dilution gives one drop of the tincture to one hundred millions of barrels; so that by the time we reach the 30th it would form a mass of alcohol larger than the whole solar system! A drop of the tincture, diffused through the waters of the Atlantic, would form a stronger solution than the 8th; and the same throughout all the waters of the globe, would be more concentrated than the 9th. If we take sugar instead of alcohol, the 3d degree of 'potence' would require more pounds than a man could carry, and the 4th degree would freight a North River sloop; the 5th a 74 gun-ship; and the 6th one whole navy.' "

The above calculation looks extremely formidable, and will by some be considered very witty. Alas for Dr. Dunglison, it has been made so often, that it has not even the merit of novelty.

If the whole bearing of the lecture did not show, that the elucidation of truth is not his object, we would advise him to look only for a moment into any Homœopathic pharmacopœia, which might be demanded from him as a public teacher, and there find an easy solution of the riddle. A bottle of alcohol and one of distilled water are all the oceans necessary for preparing the dilutions. He prefers, however, to amuse his hearers by idle anecdotes like the following :

"When the dramatist wrote the Homœopathic sentiment

"My grief is great because it is so small,"

the reply of the wag in the pit was, I apprehend, equally Homœopathic,

"Then 'twould be greater were it none at all,"

"As yet," he continues, "the most solemn part remains." With all his philosophy and learning, he cannot comprehend, how it comes ; "that the possessors of these rivers, which seem to him so irrational, should be patronized not only by the long-suffering, capricious and confiding female, but *by men, who, in their pursuit of their honest daily avocations, exhibit no lack of good sense*, and by others, who from their opportunities and position ought to be expected to reject unhesitatingly such marvellous insignificance, and who, on other subjects, exert a judicious scepticism and a just appreciation of ordinary events."

By way of explanation he adds, "It is entirely consistent with the manifestations of the human mind, that excessive credulity and excessive scepticism should exist at the same time in the same person ; and that one, who

is a declared infidel on many topics that are admitted by the wisest and the best, may yet cherish the marvellous and the monstrous."

The sensible men of which he speaks above, not being prejudiced like himself against Homœopathy by any preconceived opinions, have only looked at the facts and become convinced of their reality. It is true, they considered it at first as a somewhat wonderful and strange science, but presuming, that all the laws of nature were not yet unravelled to us, and that Homœopathy might have divulged one of these laws, they finally yielded their assent to it.

To resume, we draw the following conclusions from the foregoing extracts : 1. that Dr. Dunglison, judging from his well known knowledge of the German language, has wilfully perverted the facts ; 2. that he has not even originality enough to invent a new sarcasm ; 3. that instead of a scientific exposition of Homœopathy, he has so little respect for his audience that he amuses them with idle anecdotes. To him may be applied the answer of Don Carlos to Domingo in "Schiller's Don Carlos," viz :

"I marvel at the king's gay confessor,
Who is so deeply versed in witty tales,
But I have always heard it said
That talebearers have done more
evil in this world,
Than knife and poison
In the murderer's hand can do."

4. He appeals to the basest passions, by connecting, although in disguise, the religious opinions of some with their faith in Homœopathy. This declaration is one of the most disgraceful we have met with for a long time. It recalls to our memory the times of the religious persecutions for opinions' sake.

T H E

HOMŒOPATHIC EXAMINER.

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VOL. 3.

HOMŒOPATHIC POSOLOGY,

BY DR. RUMMEL.

EXTRACTED BY

DR. CROSERIO.

TRANSLATED BY

HENRY G. DUNNEL, M. D.

Doctor Rummel is one of those men, who, from their spirit, labor and zeal, in the discovery of truth, always acquire an eminent position in whatever career they embrace: a distinguished physician of the old school, he was vexed at the celebrity Homœopathia was obtaining, and which he considered an absurdity. For the purpose of overthrowing it, he entered upon experiments to prove and to render patent to the public, the falsity of its principles, and the nullity of the little doses.

In proceeding with these decisive experiments, he acted not as did Messieurs so and so of our Royal Academy. By a conscientious study of the Organon, and the principal medicines of the pure *Materia Medica*, he penetrated perfectly into the principles and precepts of that doctrine which he intended to refute, and the instruments which were used in its application.

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It was only after being furnished with this preliminary and indispensable knowledge, he made his first experiments, in which he expected to find a demonstration of the errors of Hahnemann; but these trials had the result they must have, which, indeed, they always do have; that is to say, they proved entirely contrary to that which their author sought to find; they confirmed in every point the truths announced by the founder of Homœopathia.

Rummel, a conscientious man, having nothing in view but truth, did not hesitate to acknowledge and to proclaim it, by giving every publicity to his observations, in a work entitled; "*l'Homœopathia, son côté brillant et son côté faible*, Leipsic, 1826," where he shows the honorable passage through which he entered Homœopathia. His reputation as a wise and successful practitioner, caused him to be called to Magdeburg by an association of the friends of Homœopathia, since 1832, with distinguished honors; his success has been so brilliant in that little city, that a second Homœopath did not suffice, for the number of adherents he acquired to the doctrine. A third was conjoined with them, and now indeed there are four: one of the founders of the *Gazette Générale Homœopathique*, Gross, Hartmann, and Rummel, his numerous articles and notes, the fruits of judicious observation, have greatly contributed to give to this periodical the celebrity which it soon acquired among the friends of the science.

Endowed with an independent spirit, and

loving nothing but truth, he has never hesitated to proclaim it every where, whenever he has thought he had found it, even contrary to his best friends. It was thus upon the question so warmly debated, of the *sufficient* and the *insufficient* raised up by Hahnemann, he was openly separated from him and his principal friends. He was elected director of the Central Homœopathic Society, over which he presided in 1838. Upon the occasion of the jubilee, of the 50th year of the doctorate of Muhlenbein, he published a résumé of the history of the last ten years of Homœopathia, in which the men, and the thing, are appreciated with a justness of idea, and an independence of judgment, that has received the applause of all its readers.

We have deemed it useful to give these indications of the author of these considerations upon the doses of the medicines, in order that our readers might be able to appreciate the importance of his judgment, at a time this question threatened to become fatal to the existence of Homœopathia; the spirit with which these writings referred to, have been made to cause disturbing doubts, should be consigned to the shade, by an authority like this, and that of the celebrated men who have given it their adhesion.

Dr. Rummel has been compelled to treat this subject by affirmations contrary to the assertions found in various writings, above all, by those of Griesselich and his imitators, that the attenuations above the sixth were null, or, at least, inutile, millions of trials having proved the contrary; but he has conceived it more difficult and important to indicate under what circumstances, such or such an attenuation is preferable, and not to fall into forgetfulness of a discovery of Hahnemann, which touches the most profound secrets of nature: He thus proceeds.

1. The natural philosopher examines the laws, for example, that of gravity, he measures

the speed of the fall in its progression, but he seeks not the exposition of the cause; he confines himself to the law. We physicians act differently, we want to know the **WHEREFORE** of nature, we cannot content ourselves to observe exactly the **HOW** of its acts.

We find when one drop of medicine is mixed with 100 drops of Alcohol, and when one drop of this mixture is again added to 100 drops of Alcohol, and this operation repeated 30 times, we find, I say, that these different mixtures still act upon the organism.

The one calls these dilutions, the others developments, and a third potencies, et cet., and each chooses a denomination conformable to his opinion of the exposition of the phenomena.

This custom is not exact, for each of these denominations imply a compound idea, they do not explain a thing, the nature of which is, as yet, unknown.

Therefore, I shall hereafter make use of the numbers 1—30 to indicate the different degrees of preparation, not prejudicating in any respect their nature, like as that which dwells in the X of the mathematician, which is the point to be found.

All the explications given up to this time are insufficient, even that of Doppler, which appears too mechanical, and does not take into sufficient account the dynamic phenomenon. It would be better to be able to determine with certainty the nature of the force of the different members; but this again is unfortunately but a simple desire.

2. A natural philosopher (to dwell upon the same example) measures the celerity of a fall; another measures it also; and it is only after numerous observations have given the same results, that they establish a table of numbers. Things present themselves differently in medicine; we are unable to repeat the same trials, because the subjects are either different, or they are changed at the time.

It is only from a quantity of analogical, and

not identical researches we shall be able to obtain an approximation to the truth; and, nevertheless, physicians often draw conclusions from one or two observations, and wish to proclaim them as invariable laws. Hence, the confusion of Babel, in which each observes only, that which he wishes to see.

3. The action of high numbers is placed beyond a doubt by a great number of attentive observers, above all the action of the 30th. Whether all the medicines preserve their action to this number, or whether some do not preserve theirs still much higher, is not, again, very certain. It seems ridiculous to argue against the power of the number 30, because in that case it would be necessary to admit that of 31, 33, and so on to infinity; for we are compelled to take into account the difficulty of preserving the purity of the numbers so high, and what obstacles may be presented to the infinite divisibility of matter, or a transmission of its forces to infinity. In short, there must be a limit to its activity, seeing that the obstacles to the division of matter, or to its development, or to its potentization, must necessarily always augment.

A sphere falls with a celerity always increasing, and, if we suppose it to fall in planetary space, its celerity must become infinite; but upon our earth it must remain circumscribed by want of space; and the same essentially in the planetary space, because the fall will be hindered by other contrary forces.
Fiat applicatio.

4. From the recognition of the virtue of the number 30, it does not necessarily follow that the number 3—10 may not have power to exercise a more salutary action; this can only be determined by experiments conducted with care, and we are not in possession of veritable proofs; only it has become probable that the higher numbers have particular advantages in certain cases. As it has been observed that the number 30 acts upon the most robust sub-

jects, we cannot deduct from the great irritability of the individual a particular indication for the high numbers; still more, it remains to be demonstrated or refuted by the adversaries of the opinion, that it had shown itself curative at that point, where the lower numbers had effected nothing.

This point, again, is so obscure, I have not been able myself to decide neither for the one, nor the other opinion.

5. Although it should be demonstrated that the number 10 acts always better than the number 20, and the number 3 or the number 6 than the number 10; it does not, by any means, follow that the number 1 or the pure tincture will be better than the number 3; the contrary has been proved in many trials. Thus, one grain of kitchen salt acts certainly very little, if at all, at 0, upon an individual accustomed to the usage of salt; nevertheless, it acts in a precise manner in its number 6, even up to 30. In like manner, a grain of the carbonate of lime acts very little upon us, for often, for example, at Magdebourg we swallow many grains of it daily in our water, but, for all that, we have distinguished the effects of Calcarea from the 3rd to the 30th.

And although the action of other medicines in their natural state cannot be denied, this action is not so appropriate to Homœopathic cure as their attenuation, development or potencies. How many of the pains of the teeth have I cured with Mercury 6 or 10, when certainly a quarter or half a grain of soluble Mercury would not have dissipated them; How many headaches are cured by Belladonna, Nux, Bryonia and Spigelia 30, when 1 grain of these substances would be dispersed with difficulty; upon the supposition, merely, that even from most of the heroic medicines we have nothing to fear from deleterious accessory effects, still, generally, the **JUSTA DOSIS** is not an indifferent thing, although it may not be the principal

6. It is a quackery, much more gross and dangerous, to administer medicines in the numbers 0, 1 or 2 every three or four hours, than to conceive it hurtful to give any other number than the 30th, and to repeat it oftener than two or four weeks. The superfluous excitations which the too gross doses determine in the diseased organs, or throughout the whole organism, allow not the salutary reactions which would take place if the necessary time were allowed for the system to operate this suitable reaction. It is necessary to take into consideration the natural course of a disease, to determine the repetition of the medicine. A hooping cough cannot be cured so promptly as a catarrh, or an acute rheumatism. The physician should comprehend the law, that in many diseases hurt may be done by precipitation ; and that expectation is often the greatest art, and, that the natural course of a disease cannot always be shortened at our pleasure without danger. We certainly have power to cut short the diseases, but only in their commencement, when there is rather a simple change of function, than a change of form, and of elements in the tissues, for when this change has occurred, we do not obtain their restoration but tardily, and we are, in that case, but the simple ministers of nature.

7. I know a case, and many good observers have reported similar, in which the low numbers either had not been of any use, or else having produced an amelioration at the commencement, were at length followed with no effect, and in which afterwards the more elevated numbers were serviceable.

I acknowledge this case is capable of other explication than that of the more potent action of the more elevated numbers, and that we may impute it to a more tardy consecutive action of that which preceded it ; but for each phenomenon we must find a different artificial explication, whilst we refuse the natural one.

For the purpose of explication it is not ne-

cessary to admit a greater power, in general, but solely a greater adaptation to the special case.

To refer to an instance, I will mention a case of asthma, in a man 30 years of age, who had already been treated a long time by several physicians of both schools. A compression of the trachea, and the larynx oppressed the individual, particularly after having spoken, mounted a stairs, or at night in bed ; he experienced anxiety, and excessive palpitations, which forced him, every night about one o'clock, and often sooner, to rise from bed, at length he found some relief after sitting up, or in promenading, and after a cough, which was at first dry, and followed at length by mucopurulent expectoration.

When reposing during the day he was tolerably well.

One dose of *Nux vomica* 30 ameliorated it to that degree he passed the first night in an endurable manner, and this amelioration continued the second day, after which a second dose was administered with the same success. Then globules of sugar of milk were given alternately with the medicine, and always after these unmedicated globules, he had a much worse night than when he took the *Nux vom.* After this, *Nux vomica* 12 was given to him ; the result was not favorable ; he was again compelled to leave his bed at one o'clock, and the cough, which latterly had been very moderate, and did not appear until about six in the morning, assailed him at one o'clock, at the same time as the asthma, and this state continued several days, in which he took *Nux vomica* 12 every night, up to that upon which I administered to him anew the number 30, after which his calm nights returned.

8. Since the research is difficult, and error is possible, about these obscure and hidden actions of nature, it becomes us to proceed with great prudence, and not to treat as weak headed, and credulous those who think differ-

ently from ourselves. He who has practised at the bedside of the sick with the high numbers, with wisdom and attention, cannot believe them indifferent or inactive, or else he is a bad observer, or has chosen an inappropriate medicine. One proof of the action of the medicines, and contradictory of the opinion that the forces of nature alone may have been useful, without the medicine, is offered by the circumstance, in which, for a Homœopathic treatment, we are unable to find a medicine entirely appropriate; we often observe that portion of the symptoms of the disease disappear, which was peculiar to the medicine, and the other symptoms not to make their disappearance until after the administration of a second medicine, appropriate to those sufferings.

9. According to the opinion of many observers, in the chronic diseases, without excepting the organic alterations, the high numbers have acted extremely well, after these diseases had been for a long time treated unsuccessfully by the material doses.

The materialists seek to explain this phenomenon upon the supposition that the attenuated atoms of the medicines penetrate more readily into the small vessels and tissues, into which the more gross particles cannot pierce; a dynamist imagines that the medicine divested of its materiality, so far as to a simple dynamization, operates better through the nervous force; a third will seek to form for himself another sort of explication, but, in all these cases, with clear-sighted eyes, we are compelled to own that we cannot deny a real action. In truth, the improbability and the contrast with our ordinary ideas which exist in the action of the high numbers, are to me one proof the more of the reality of the curative virtues observed: for every one is more disposed to admit as true, ordinary things, than those that are strange and incomprehensible; whilst with those that are astonishing we proceed

with much greater precaution and scepticism, and when those things that are extraordinary and inconsistent to our preconceived opinions, are acknowledged as truths, it is an additional evidence of their accuracy.

10. The advisers of the low numbers advance many arguments in their favor, which are easily refuted. I shall not occupy myself, except with the proof of their greater activity, drawn from experience. Thus, Dr. Schmid says, "plain good common sense speaks in favor of strong doses." I appreciate much the force, but cannot estimate highly the justice of the observation; common sense is the result of the action which science and experience exercise over the ideas of the multitude; so, we observe public opinion always follows the same course; it mounts, or descends with the elevation or fall of science.

The motion of the earth, and its spheroidal form are now admitted by common sense. It was not so, formerly, and the same good sense which took part in this opinion, contrary to that of Rome, maintained the contrary, as an indisputable opinion, previous to the luminous ideas of Gallileo; common sense likewise finds the *CONTRARIA contrariis* more natural, and more probable than the *SIMILIA*, and the gross doses more so than the small, without having any other reason therefor, than because it has so thought, up to the present time.

The material signs, even, of the medicines, are not always a proof of their greater virtue; and when Dr. Schmid so far forgets himself as to pointedly affirm, he believes he should do violence to his conscience, if in dangerous diseases he administered medicines which had not those material signs, he indirectly accuses all those who do otherwise, of being without conscience. Chemistry, likewise, is far from having attained its utmost perfection; that, which is impossible for it to discover to-day, will not, perhaps, be so to-morrow.

Previously to its having been discovered,

that in starch we possessed a reagent for Iodine, its material presence oftentimes escaped our senses ; it was the same thing with Arsenic, the alcaloids, &c.

This manner of determining the size of the dose, would be likewise subject to continual alternations, and follow the perfection of chemistry.

Why, then, does it need a more gross reagent to decide a question, in which the so delicate organism deposes in such an incontestable manner ?

When we witness the effects of the doses called immaterial, and which we see can always be repeated, why should we deny their virtue ? We can smell Ambra distinctly in the 4th number, and, nevertheless, chemistry cannot show its presence.

Let us abandon this foreign ground, and confine ourselves to the organism, we shall approach much nearer to the solution of the question, than by calling in chemistry to our help. Many substances act more energetically upon our senses in a state of attenuation and of development. I am endowed with a very acute smell, and I smell a violet very little when applied under the nose, and scent it very strongly at a greater distance. It is the same thing with the odour of a cigar, which I scarcely smell when smoking it myself, but which I scent very plainly at twenty paces distance.

It is the same with the example of kitchen salt heretofore mentioned, its abuse produces readily eruptions upon the skin, a scorbutic state, a disposition to dissolution of the humors, and an enfeeblement of digestion ; but all these phenomena do not occur until the body is saturated with it, this does not take place with its moderate habitual usage ; nevertheless, it acts in the sixth number and higher.

A patient, who suffered a most stubborn constipation, the sequence of a weakness of

the spinal marrow, produced by sexual excess, and which had resisted all kinds of purgatives, until it reached that point it was necessary to extract with the fingers, from the rectum, the fecal matter which had hardened there, and produced a sensation of insupportable fullness in the abdomen, took at first Nux vomica and Calcareæ, with relief of only short duration ; a dose of Natr. Mur. 6 relieved the difficulty for several weeks, and its repetition always produced the same result ; at length it was followed with a diarrhœa for several days, and this effect of it continued up to the period of his death, which occurred several years afterwards, in consequence of a suppuration of the bladder.

Another instance, similar in every respect, I observed in an old man, where a dose of Natr. Mur. 6 caused the disappearance, for a long time, of a constipation, which had for its cause a thickening of the parietes of the rectum.

The contrary argument, that we often see cures performed by strong doses of Homœopathic medicines, as employed in the old school ; for example, Belladonna, proves nothing, for we often witness, in consequence of such doses, the greatest lesions of the whole organism ; although this does not always happen either, because but a part only of the medicine is absorbed, or the sensitiveness of the subject is very obtuse ; this neither proves another thing, that the organism tolerates a medicine in strong doses, so long as the diseased organ absorbs its virtue in the destruction of the malady, for example, the Tartar Emetic in inflammation of the lungs, and Calomel in that of the Brain.

When Dr. Schmid speaks of having seen exasperations occur after the administration of the high numbers, and which never had occurred after the grosser doses, he is contradicted by experience, for others have often seen exasperations, and concomitant sufferings

after the strong doses ; if, secondly, the exacerbations took place more frequently after the high numbers, it should be a proof of their power.

Schmid explains this experience entirely different, and thinks that the disturbance is the effect of the insufficient support of the curative power of nature, and seeks to prove the justness of his reasoning by asserting, that these exasperations find their surest antidotes in the repetition of the medicine ; this is not always true, and his theoretic proofs have no other value than supporting his views of morbid actions. These considerations, however, lead us too far away from our subject.

It is different with those proofs which the partizans of the gross doses draw from their experience, and we esteem them as they should be valued, when coming from men worthy of belief ; but we would remark that these men used most generally those medicines obtained at pharmacies, and that they necessarily must oftentimes have been deceived ; we can scarcely trust to the apothecaries for the doses of material medicines ; and never at all for the dilutions, and as we cannot in this way be certain, it is indispensable, when we wish to make experiments, that we prepare the high numbers ourselves.

I do not know that it depends on this circumstance, but I have myself carefully shaken my mixtures with the full force of the arms ; I am always supplied with the spirits of wine of the purest kind possible, this has, without doubt, contributed very much, and I have seen the effects better developed, even to the number 30.

11. There is a vast difference between the old school and the Homœopathic, relative to the principles in the administration of medicines. We may express it, perhaps, in this way : Allopathia gives as much medicine as the system will bear. The Homœopaths give the medicines in the smallest quan-

tity necessary to suitably excite the organism.

It is, perhaps, occasionally true, that we miss and lose somewhat, but the result thereof is a lesser evil, which we can easily repair by a stronger dose.

But, that the Allopaths often do too much is certain, and we daily witness the sad results thereof : for the torments of medicines are often more painful than those of the disease ; they misconceive them, and falsely attribute them to the disease, for Allopathia possesses no *true* Materia Medica, although it has many *printed* treatises thereon.

If Homœopathia abandons its treasure of the petty (immaterial) doses, it will speedily wander away from its faith. Oftentimes it will do direct hurt, when it is incapable of usefulness, and thus ruin its most admirable Palladium.*

* It seems that the danger has become very evident in Germany, inasmuch as Doctor Rummel has given himself so much trouble to announce anew so lengthily the arguments in support of the efficacy of the high attenuations ; which is so easy of proof to those who wish to investigate in good faith. This deviation from the good road of Homœopathia, which has given such just fears to its friends, is an evidence of the injury a wicked writer may inflict upon the best proved things, when possessed of perseverance and a forehead that nothing can redden ; by means of his sarcasms and gross revilings he has intimidated those practical men who prefer tranquility, for the purpose of avoiding the impertinences of a bad tongue, they have confined themselves to the exercise of their art ; and their silence has been a serious calamity, because it has been advantageously seized hold of by its enemies, who have thus spoken without contradiction, until it has become an easy matter to inspire doubt in feeble minds, or in those who have not as yet sufficient knowledge in the art, or in those who like these dangerous doctrines better, on account of their similarity to those of the old school.

We have thought it best to bring to the knowledge of the French Homœopaths these new arguments, and

When I endeavor to draw certain rules from my observations, I am unhappily compelled to affirm that it *appears* thus to me. Assuredly the doubt will not be satisfactory to those men who insist that every thing shall be positive; those who *are never mistaken in the choice* of the medicine, nor their doses, who place their want of success to the account of Homœopathia, and not to their default of judgment, I write not, however, for these gentry.

A. The highest numbers appear to act advantageously upon the organism in general, and to deploy the peculiar properties of the medicine as soon as they meet with a corresponding state of the organism; they seek out in diverse directions the morbid conditions, and induce general ameliorations. The general condition becomes ameliorated, before the local condition has experienced any change, and in those cases where the cure is beyond the resources of art, they aid the strength of the individual to better endure the attacks of the enemy; the consumptive picks up his flesh and strength, and those *symptomata symptomatum* sometimes so painful, are dissipated, and the patient often enjoys for a long time a tolerable existence; until at length the indestructible enemy gains the superiority, and the scene is closed by death.

When the cure is possible the progress is as indicated, only the amelioration continues to advance instead of being arrested, and the patient finds himself cured, because the principal malady is dissipated by the favorable impulsion given to nature at the commencement.

There is a class of numerous affections of the abdomen, and those called hypochondriac or hysterical, which find their cure in the high

the opinion of a man of such great experience, as a guard against a wound so fatal to the prosperity of Homœopathia.

C. C.

numbers, also in those diseases where the venous system, or the nerves of the abdomen are affected, without our being able to discover any decided alteration in any organ. But it is very essential in these cases to observe the symptoms in their most delicate shadowings, and not to content ourselves with diagnostics, agreeable to the practice of the old school. These diseases are those in which the method of generalizing will obtain the fewest cures.

B. Frequently a medicine which appears the most appropriate, does not act according to our desire; it is a case in which to make trial of the different numbers, and it is not always the most expedient to descend to more massive doses, often it is more salutary to mount the degrees of the scale.

It is not rare that an aggravation will supervene after a Homœopathic dose of the high even as from the low numbers, and notwithstanding this be followed with no consecutive amelioration.

The cause in this case is often a bad choice, but not always when this has followed from low numbers, for in this case I have sometimes witnessed the desired effect from a higher number. I have spoken as yet only of the propriety of the high numbers in the diseases of the abdomen, but I have also been obliged to mount up to higher numbers in order to obtain cures in material (organic) diseases, visible to the eyes, as in ulcers of the legs, &c.

C. With the grosser doses and frequent repetitions we can in general forcibly produce a determinate action, if it be one of the peculiarities of the medicine. But, as ordinarily in acute diseases we can recognize with difficulty the proximate cause of disease, and are often obliged to combat a certain dangerous extension of the disease, there, the low numbers often find their applicability, especially if the disease have been well diagnosticated; so that the choice of the medicine is subject to less doubt. But, then, as nature revolts against all

those efforts in opposition to herself, we sometimes witness in these cases, that the symptoms which we have more particularly combatted, disappear, but the disease develops itself in some other organ.

Hufeland brings forward these observations as one proof of the solely palliative and never radical cure by Homœopathia; but unjustly, however, for the cause should be attributed to the bad manner of practising it.

However, the cases are rare in which nature is disposed to transport the *materies morbi* to some excretory organ for the purpose of its expulsion, or being rendered innocuous, this oftener happens, however, when nature, not having been enfeebled, and interrupted by Allopathic attacks of bleedings, purgatives and vomits, has been enabled to act and regulate her own movements.

Hence it happens that the low dilutions much oftener produce a crisis through the skin, and since their use has become more general, the cure by *Lysis* is no longer a property of Homœopathia.

D. When a medicine acts well, the cure continues to progress, but often too slowly; the choice of a lower number sometimes accelerates it; nevertheless, it will not answer to go too far down, for in that case accessory sufferings may supervene. Precautions are necessary in their choice, because oftentimes they will cause aggravations, and still oftener disagreeable accessory sufferings. Thus, I have this day witnessed a very diffuse and fully developed urticaria supervene, from a few doses of *Lycopodium* 6, given for an affection of the urinary organs; from *mezereum* there supervened a disagreeable sensation in the intestines, and distress of several hours duration, and which was repeated after each dose of the medicine. I have one example of Homœopathic aggravation more particularly impressed upon my mind, in consequence of its occurring in two individuals at the same time,

affected with the same disease, and residing at a great distance from each other.

I had treated two robust young girls, affected with psoriasis guttata, especially with Graphites, and had cured it all except a few remaining tettery spots, when I gave to both of them Graphites 6, from 3 to 5 drops every second day; after eight days I saw with terror, in both patients, the whole body covered with a new tetter, and this artificial disease did not give way until after a long course of treatment. Such effects from the medicines are much more frequently evident after the low than after the high numbers.

E. With the high numbers, the necessity of the repetition is more rare, if the acute progress of the disease does not otherwise require it; with the low numbers I have found it necessary to repeat more frequently in order to obtain the same result. I am compelled to put the reader upon his guard against my hypothetical maxims for they may in the end prove incorrect.

F. Perhaps the low and the high numbers are antidotal in their effects, certain facts seem to affirm it. Opium 3, in drops, often repeated, dissipated the violent pains of the belly with efforts at vomiting, great agitation, and inability of enduring the touch upon the abdomen, in a case of uterine neuralgia of a pregnant female; *Nux vomica* 3 has often been useful in diarrhœa, with great tenesmus, (of course an affection of the lower portion of the intestine) whilst the higher numbers, 12—30 often cure chronic constipation, and accomplish nothing in chronic diarrhœa.

G. A medicine which has a specific action upon a diseased organ, but which is not specific to the disease, produces so much the more aggravation, without consecutive amelioration, in proportion to the strength of the dose in which it is given. Often there results from it a change in the form of the disease. This is observed more frequently in diseases of

the skin; in those places where there are scales they assume the form of pustules, &c. Consequently it is necessary to search with care into all the particulars of the disease; and to know exactly the virtues of the medicines, in order to treat it with success.

Unfortunately we find chasms in this study, which an attentive application, a good faculty of observation, and a spirit of bold foresight, alone, can effectually fill up.

Even now, we should be very unfortunate in our cures, if there were not several medicines (the polychrests) which respond more or less to several parts of the organism; and thus to different forms of disease and which act, although not always, still oftentimes in a salutary manner. As this, however, does not always happen, and as those commencing Homœopathia mistake ordinarily the characteristic properties of the medicine, we should counsel them in their first essays to make use of the middle numbers, and the highest if they do not wish to interrupt their results.

H. When a medicine has been mal-administered in large doses, for a long time, as, for example, in the Allopathic treatment by Mercury, Sulphur, or Cinchona, the lightest Homœopathic doses of the same medicines often produce aggravations.

I. In the incurable disorganizations, we should avoid the gross doses, because they only produce exasperations, without consecutive ameliorations.

I leave to the judgment of the competent reader to decide if I have arrived at the truth, and in what point I am impeached.

I should be happy if those experienced practitioners in Homœopathia, who have treated diseases with different attenuations would publish their opinions; and I solicit especially my friends, Doctors Elwert, Filitz, Gross, Hartmann, Stapf, Haubold, Muhlenbein, M. Müller, Reisig, Schubert, Wahle, and V. Wolf.

It is necessary to labor long and zealously

upon this matter, if we wish to discover the truth, and not to express preconceived opinions, and we will say with J. Paul, "Truth, like the Venus de Medicis, will be transmitted to posterity after 30 centuries, and will then, in like manner, be converted into a Divinity."

Signed RUMMEL.

Three of those practitioners invoked by Dr. Rummel, have already given their opinion at the bottom of his memoir.

Dr. Gross says: The ideas above expressed accord in their principal points entirely with mine, upon the matters in question.

Hartmann says: I have made a great many researches with this design, and I have sometimes thought I had obtained different results, but these are so few in number, as to require a great number of confirmations before they could be admitted as fixed rules. The most numerous of my observations and experiments arrange themselves under the laws as given by Rummel; only in respect to paragraphs E and F, I have not been able to decide in a positive manner, seeing that my experience speaks both equally for, as the contrary.

Haubold says: My observations upon the size of the dose have given me about the same results reported more in detail by Rummel. In consequence of this, I hardly use any more the lowest potencies, the mother tinctures, or substances in their natural state.

I administer oftenest the middle potencies, from which I obtain the desired result in the most sure and prompt manner. In Syphilis alone I always give the lowest potencies, ordinarily the first, or the second trituration, and I very rarely go above the third. I see no termination, for a long time to come, of this interesting chapter, and I most ardently desire

to read hereafter reflective and passionless communications upon this subject.

Croserio says: We are happy to find the opinions which we have been able to form upon this question, after our ten years of experience, and which we have many times published, accord in general with those of the four veterans of the science, who have had twenty-five to thirty years of experience, and we conjoin most ardently our solicitations to theirs, to engage their confreres, who have practiced Homœopathia with that attention indispensably necessary, to make known their observations.—*Annales de la Médecine Homœopathique. Paris, Avril, 1842.*

CLINICAL LECTURE ON HOMŒOPATHY.

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LONDON.

LARYNGITIS CHRONICA.

The causes are the same as those of laryngitis acuta, which it sometimes follows; yet they only succeed in producing the disease by a long and persevering action, or when the subject has a predisposition, arising from psoric or syphilitic virus.

Symptoms.

The voice is veiled or hoarse, or there is more or less complete aphonia, or these symptoms occur alternately; there is pain or uneasiness in the larynx, augmented by pressure, or by the inspiration of air which is too cold or too hot, caused sometimes by the deglutition of solid food; a dry cough comes on which the patient distinctly feels to be excited by the pain in the larynx, or by prickings and tickling in it: this slight cough is seldom at-

tended with expectorations at the commencement of the disease, nevertheless it is sometimes followed by mucous and frothy expectoration of an adhesive nature; there is sensation of heat in the larynx, and sometimes dyspnœa; the act of speaking fatigues the patient, and the symptoms then assume a greater intensity. This state may continue for a considerable time without disordering the general health; eventually, however, the disease acquires gradually, and at times suddenly, a much more severe aspect, and phthisis laryngea shows itself. This is marked by local symptoms, announcing a serious alteration of the larynx, and by general symptoms denoting the presence of phthisis pulmonalis.

The local symptoms are: a dry cough, with alteration in the tone of voice; a cough frequently convulsive, painful, attended with efforts to vomit, in the midst of which is brought up a puriform or even purulent matter; this cough occurs especially during the night; sometimes the patient is awakened by fits of suffocation; the breath is often fœtid; deglutition sometimes impeded, painful, and even impossible, while it is followed by violent fits of coughing. In cases wherein the sub-mucous cellular tissue is affected, the breathing has a whistling sound, the cough, breathing, and voice are croupal, and during the fits of suffocation, inspiration becomes extremely painful; the face loses its color, and assumes the appearance of wax. The general symptoms are a hectic fever, a gradual emaciation, marasmus, nocturnal sweats, and, in the last stage, a colliquative diarrhœa.

Pathological Anatomy.

On proceeding to the opening of the body, we find various alterations presented. Sometimes there are slight or scattered ulcerations, which, with a hard base, sometimes occupy completely the cavity of the larynx, the upper part of the trachea, the mucous membrane

which lines the posterior part of the pharynx, the anterior surface of the epiglottis, and the pillars of the velum palati. Sometimes instead of slight ulcerations, there is a considerable ulcer occupying the ventricles, or one of the two vocal chords, or both chords at the same time. The ulceration sometimes shows itself subsequently to a submucous abscess, in the midst of which may be seen the cartilages laid bare, ulcerated, or destroyed. The lungs present different aspects, sometimes phthisis pulmonalis in a very advanced stage; sometimes, on the contrary, crude tubercles, or miliary granulations are found in the midst of a perfectly sound lung.

Mechanism.

The same as in laryngitis acuta, for it is always after the frequent repetition of a cold, that the disorder shows itself. The symptoms which are exhibited evince the effort made by the organism to reject a morbid cause; colds frequently repeated can therefore alone bring about an organic action on the larynx, that may be termed permanent or chronic; but in almost all cases cold has only been the exciting cause, psoric or syphilitic virus are the predisposing causes; they only awaited an exciting cause in order to declare themselves. The psoric or syphilitic virus circulating in the blood is deposited on the mucous membranes of the elementary organs; so long as they offer no impediment to the organic actions of the part, the vital principle leaves the part quiet, but so soon as the morbid cause becomes inconvenient, the vital principle instantly causes a revolution in the organism, that it may expel from its centre the extraneous body. Therefore when the psoric or syphilitic virus have fixed their seat in the larynx, if a cold occurs that accumulates blood there for the purpose of being purified, this organ is immediately driven to an increased action by the vital principle, and it rids itself, or endea-

vors to rid itself, at one and the same time of the absorbed materials of the checked transpiration, and of the syphilitic or psoric virus.

We will not return here to an explanation of the symptoms, which would be exactly similar to that given for the other forms of bronchitis. To this latter we therefore refer the reader. We will add but one word on the ulcerations: they are the result of a combination of the psoric or syphilitic virus with the tissues of the organ, and this new combination is as it were disorganised by the accumulation of caloric which takes place in that part to the effect of destroying this abnormal association, and facilitating the expulsion of the virus in the form of a slough, and afterwards pus.

Prognosis.

This must necessarily vary according to the different degrees of the disorder. Nevertheless, the cause and mechanism of the disease being well known, and possessing as we do very powerful means of strengthening the curative vital action, the prognosis on which we have to decide must evidently be most favorable, when compared to that which would have been given before we were completely acquainted with the power of our remedies. Thus, if we are called upon to pronounce on the fate of a phthisis laryngea treated by the ordinary means, leeches, blisters, issues, setons, moxas, purgatives, and narcotics, we can but say, that in the immense majority of cases, the patient will fall sooner or later a victim to the disease; but on the other hand, should the same person, retaining still in himself sufficient vitality and strength, be subjected to Homœopathic treatment, directed with due ability, he may entertain the almost certainty of a radical cure, if he follows with perseverance and rigor the prescribed treatment. Under Homœopathic treatment, cases of death in this disease will be exceptions; treated according to our ancient methods, the cases of death

will form the rule, favorable cases being the very rare exceptions : for in the first method all our efforts tend to strengthen the salutary efforts of nature ; and in the second manner of treating, all proceedings are in direct opposition to the efforts of vitality, and tend to exhaust its principle.

Treatment.

In the treatment of this affection we must constantly bear in mind its mechanism, and the causes which have given rise to it, that we may on one hand expel or neutralize these latter, while on the other hand we foster and sustain the salutary efforts of nature by medicines which will produce similar organic actions.

Should syphilitic virus be the cause of the ulcerations, it will be necessary, *imprimis*, to have recourse to *Mercurius*, from six to eight globules might be prescribed of a low dilution, 4th or 6th. This medicine may be repeated two or three times, at intervals of thirty-six or forty-eight hours, unless the first dose have caused an augmentation of symptoms, in which case it will be preferable to wait until this organic action have subsided ; should the patient then appear very much better, we must await the end of this progressive amelioration before prescribing anything else.

If after the mercury there occurred fever, heat, frequency of the pulse, as intermediate assistance it would be proper to prescribe a dose of *Aconitum*, of the 24th or 30th dilution, returning subsequently to the above-named dose of mercury, or one rather weaker if that is too distressing to the patient. After this remedy you may administer *Lachesis*, especially if the patient feels a great sensitiveness of the larynx to external pressure, and considerable difficulty in breathing ; this medicine will be prescribed at the 15th or 18th dilution, and may be repeated, if the corresponding indications persist, two or three times, at inter-

vals of two, four, or five days. If the disease should not entirely give way under the remedies here mentioned, *Nitric Acid* must be prescribed. The symptoms which more particularly refer to this, are, hoarseness, cough, with shooting and excoriating pain in the throat, roughness in the larynx. It should be prescribed at the 30th dilution, if the disorder be of old date, and that the vital principle require sustenance ; if, on the contrary, this be only the commencement of the disease, and the vital principal possess its full energy, a low dilution must be administered, for instance, half a drop to a drop of the 3rd or 5th.

The same rule must be observed at the conclusion of the treatment, the vital energy being then restored, we have only to strike the last blow on the morbid cause, and the low dilutions will perfectly accomplish that object by the material principle which they retain sufficiently for the purpose. This medicine (the nitric acid) may be repeated, if necessary, at the end of six, eight, or fifteen days.

When laryngitis chronica has for predisposing cause a *psoric* state of the constitution, which happens in most cases, we must choose and oppose to it those remedies called antipsoric. *Aconitum* nevertheless is again useful here as an intermediate power, when we wish to sustain a strong movement of fever, or a strongly marked inflammatory state of the larynx ; one or two doses of the 24th or 30th dilution, given from six to twenty-four hours apart from each other, will accomplish this object. Afterwards you must administer those antipsoric remedies which will best correspond to the curative acts of vitality. We may return to *Aconitum* in the course of the treatment, if it is again indicated by appearance of fever, or strong inflammation ; but the practitioner must guard against an abuse of this remedy, he will often lose very valuable time if he persist too long in employing it.

Hepar Sulphuris, one or two globules of the

30th dilution, should be applied when the patient is not only affected with permanent hoarseness, but that the voice is weakened, and rough ; when there is also a constant pain of the larynx, augmented by speech, cough, or pressure ; cough, provoked by irritation of the larynx, and frequently accompanied by fits of suffocation, a greater or less degree of restlessness, emaciation, hectic fever, with much perspiration ; if there should be added to these symptoms great nervous irritability, sadness, and even a wish to cry, or else anxiety, and an extreme state of apprehension, particularly towards evening, then hepar sulphuris will be indispensable.

Arsenicum will be administered when the cough is excited by a feeling of constriction in the larynx, or by a sensation similar to that produced by the fumes of sulphur ; when the patient feels great difficulty in expectorating a little very tenacious mucus, sometimes streaked with blood, at other times frothy ; when he feels in the larynx a dry and burning sensation ; when his voice is very unequal, at times very weak, at others stronger, but always more or less hoarse. *Arsenicum* will be still better indicated if the patient's face be pale, hollow, and yellowish, when he often complains of cold over the whole body with cold and viscous sweat, of nocturnal shivers followed by heat, of partial or universal and viscid sweat, cold, hot, or colliquative, with irregular, frequent, and small pulse. There will be still greater propriety in the use of *arsenicum*, if the patient, besides possessing all these symptoms, be undecided in character ; if his humor varies, and that he wishes first for one thing, then for another, and is discontented when he has obtained what he asked for ; he is ill-humored, impatient, angry for trifles, cross at everything, having a disinclination for conversation, or taking great pleasure in blaming others, although he is himself very susceptible.

It will often be advantageous to alternate this medicine with the hepar sulphuris, and at the beginning to give them equally at the 30th dilution, in order to raise the vital power, which from the symptoms described is evidently hurrying rapidly towards its decline.

Causticum, from one to three globules, of the 30th attenuation, is indicated when the hoarseness shows a strong resistance, when there is almost total extinction of the voice, as if it were caused by a paralytic state of the muscles of the larynx ; and that the patient experiences in that organ a feeling of excoriation ; cough excited by cold, or by the efforts of the voice, and provoked by a sensation of excoriation, or of tickling in the throat.

Causticum is peculiarly appropriate when the disorder is especially local, and has not yet awakened numerous sympathies ; nevertheless it might be prescribed in those cases, if the local symptoms were similar to those which we have described, after having administered another medicine, whose function it was to assist the other organic actions which are not in the immediate vicinity of the organ first attacked ; in such cases it is necessary to allow the action of the first remedy to be first well established, and after waiting one or two days, or even more, then to prescribe *causticum*.

No fear need be entertained of destroying one medicine by another, provided they be not antidotes to each other, for each by its peculiar affinity is borne towards certain tissues, where it exerts itself to strengthen the beneficial influence of the vital principle.

Carbo Vegetabilis is also very useful in the treatment of the disease which we are now considering. It is chiefly to be given when there is protracted hoarseness, aggravated towards evening, or by conversation, moreover when it is observed that cold and damp weather cause an increase of these symptoms. The patient feels a scraping, tickling, prickly itching that annoys him in the larynx, and

excites a cough either dry, or followed by a viscid, salt, or mucous expectoration. These phenomena occur principally in the evening, at the time of going to bed, or in the morning after rising. At other times the patient feels a constant sensation of pricking or itching, with roughness in the throat, attended with a frequent and hoarse cough, occasioning pains in the chest, and especially in the larynx, as if it were excoriated. To these symptoms characteristic of the use of *carbo vegetabilis*, we must add in many cases shiverings and cold over the whole body, followed by temporary heat at night, especially in the hands and feet, also perspiration at night or early in the morning.

Manganum is indicated when hoarseness and roughness of voice are very distinct and obstinate, when these phenomena are aggravated in the morning or by exposure to air; when the patient feels a sensation in the larynx as if that organ were closed. When he wishes to speak, a dry cough takes place; immediately he feels a painful dryness and roughness in the larynx, in the morning he expectorates small globules of yellowish-green mucosity, with a moderate cough. *Manganum* will also be very appropriate when rheumatic pains accompany or have preceded the symptoms which we have just enumerated, when these pains have their seat in the articulations or in the bones, and that the body is sensitive to the least touch; sometimes shivers with passing heat in the head.

Manganum is prescribed in doses of one or two globules of the 30th attenuation; unless some peculiar or urgent indication occur, we must be cautious not to give a second dose of this medicament too soon, for it acts during a considerable length of time; in the majority of cases it will be necessary to give another medicine before returning to *manganum*, which often pursues its action from eight days to thirty, and very favorably.

Drosera is of use when phthisis laryngea proceeds rapidly, whether it be or not connected with phthisis pulmonalis. A hoarse and very low voice, accumulation of glaires, whether hard or soft, yellowish, greyish, or green, all indicate the use of this remedy; great debility of the body, with face drawn, hollow eyes, are signs that call for it. It is prescribed in a dose of from one to three globules of the 9th to the 30th dilution, and according to the rules laid down for the other remedies. *Drosera* must be allowed to act from two to six days, after which time it may be repeated if necessary, or recourse may be had to a more appropriate anti-psoric.

Laryngitis chronica being frequently complicated with other diseases, such as phthisis pulmonalis, gastro-enteritis, we refer for the treatment of those complications to the articles *phthisis pulmonalis* and *gastro-enteritis*, adding only that among the medicines there indicated, *Calcarea*, *Phosphorus*, *Iodium*, and *Sulphur*, play very prominent parts.

The regimen of the patient must be severe during the whole course of the disease; doubtless we should endeavor to feed the patient, but care must be taken not to submit the stomach to too long a privation. Meat broths, light soups, beef or chicken jelly, or jelly of veal or mutton will be required; milk for those patients who digest it well and easily. By degrees we may pass on to more substantial aliments, such as a mutton chop, or a small quantity of roast beef or chicken, which the patient must at first be made to masticate without swallowing the fibres, afterwards he may be allowed to swallow them; a little bread and some vegetables. Toast and water, or gum water, for beverage. You cannot permit the least exciting drink, which always retards convalescence; stimulation is produced by them, but no real strength, on the contrary, they throw persons into a weak state from which they have difficulty in recovering, and

the good which they appear to cause is always deceptive.

CHRONIC LARYNGITIS.—ACONITUM.

Primitive Symptoms.

Pain in the larynx, also to the touch; a constant desire to cough, produced by an irritation or a tickling in the larynx; short and dry cough, principally at night.

Sympathetic Symptoms.

Dry and burning heat; pulse hard and accelerated; a strong disposition to be angry, or to be frightened.

CHRONIC LARYNGITIS.—ARSENICUM.

Primitive Symptoms.

Hoarseness; voice rough; trembling, unequal; sensation of dryness and burning in the larynx.

Consecutive Symptoms.

Tenacious mucus in the larynx; spasmodic constriction of the larynx; dry cough, sometimes deep, fatiguing and shaking, principally in the evening, after lying down, or at night, with a wish to rise; often with a difficulty of respiration. Cough excited by a sensation of constriction and stifling in the larynx, as if by the vapour of sulphur; difficult expectoration of sanguineous mucous, or of a frothy nature.

Sympathetic Symptoms.

Breathing at times difficult, with cold sweat; spasmodic constriction of the larynx and chest. Rapid failure of strength; emaciation and colliquative sweats, great weakness, face earthy, eyes sunk, and a dark line under them; sleep not refreshing. Cold over the whole body, sometimes with cold and clammy sweat; general heat, principally at night, with anxiety; pulse frequent, weak, small, and irregular; sweat at night, or in the evening on going to sleep, or in the morning. Extreme sensibility of all the organs. Ill humor, impatience, repugnance to conversation, and great susceptibility.

CHRONIC LARYNGITIS.—CARBO VEGETABILIS.

Primitive Symptoms.

Raucity of the voice, chiefly in the evening.

Consecutive Symptoms.

Prolonged hoarseness, especially towards evening. In the morning and evening hoarseness aggravated by conversation, and chiefly in cold and damp weather. Scraping and crawling, and tickling in the larynx; cough excited by a crawling in the throat, with burning pain and sensation of excoriation in the chest.

Sympathetic Symptoms.

Rheumatic pain in the limbs, of a drawing nature, attended by weakness, and difficulty of breathing; shivering and cold in the body; nocturnal sweat; irascibility.

CHRONIC LARYNGITIS.—CAUSTICUM.

Primitive Symptoms.

Hoarseness, morning and evening.

Consecutive Symptoms.

Prolonged hoarseness, with voice weak and stifled; aphonia, from weakness of the muscles of the larynx; sensation of excoriation in the larynx, when not swallowing; hawking up of abundant mucus, especially in the morning; cough excited by speech.

Sympathetic Symptoms.

Strong shivering; nocturnal sweat, sometimes of an acid smell; fear, especially at night; inquietude, apprehension; little disposition to exertion; discouragement; quarrelsome and cavilling spirit; irritability.

CHRONIC LARYNGITIS.—DROSER.

Primitive Symptoms.

Hoarseness, and a very low voice; sensation of dryness or roughness, and of scraping in the bottom of the gullet, with inclination to cough.

Consecutive Symptoms.

Cough and hoarseness; crawling in the larynx, which excites a short cough and shootings as far as the throat; sensation, as if there were a soft body, such as a feather, in the larynx; accumulation of slimy matter, alternately hard and soft, yellowish, greyish, or greenish.

Sympathetic Symptoms.

Shuddering over the whole body, with heat of the face; icy coldness of the hands, and absence of thirst, or shivering with cold, and paleness of the hands, feet, and face. The least thing sets the sufferer beside himself.

CHRONIC LARYNGITIS.—HEPAR SULPHURIS.*Primitive Symptoms.*

Hoarseness, pain, and great sensibility of the larynx, with weak and rough voice; the pain in the larynx aggravated by pressure, speech, coughing, and breathing; cough excited by irritation of the larynx.

Consecutive Symptoms.

Weakness of the organs of speech and of the chest, causing a hinderance to speak loud.

Sympathetic Symptoms.

Emaciation; shivering, with chattering of the teeth and coldness in the hands and feet, followed by heat and sweat, especially on the chest and forehead, with little thirst; dry heat at night; flushes of heat with sweat; nocturnal sweat; ill-humor; dislike even to see friends; excessive irritability.

CHRONIC LARYNGITIS.—MANGANUM.*Primitive Symptoms.*

Obstinate hoarseness and raucity, especially in the morning and in the open air, as if caused by a chronic inflammation of the larynx.

Consecutive Symptoms.

Sensation, as if the larynx were obstructed; catarrh, with coryza and hoarseness; cough, with hoarseness; dry cough, excited by read-

ing aloud, or speaking long, with troublesome dryness and roughness in the larynx; copious expectoration of small globules of yellowish green mucus, almost without cough in the morning.

Sympathetic Symptoms.

Rigidity of the nape of the neck; feverish heat in the chest and cheeks, with painful sensibility of the whole body on being touched; nocturnal sweat, sometimes only on the neck and legs, which forces one to scratch; peevishness and taciturnity, with concentration in oneself.

CHRONIC LARYNGITIS.—MERCURIUS.*Primitive Symptoms.*

Continued hoarseness and loss of voice; nasal voice; painful dryness of the throat, which impedes speech; pain, as if from exco-riation in the throat, or sensation of heat, which ascends into the gullet; burning and tickling in the larynx.

Consecutive Symptoms.

Swelling, redness, and suppuration of the amygdalæ; pressure and pain, as from exco-riation and ulceration in the œsophagus. Inflammatory swelling and redness of the posterior part of the mouth and throat; sensation as if there were a tumor or some foreign body in the throat, which it is necessary to swallow; shooting pain in the throat and in the tonsils, principally in swallowing; accumulation of thick and tenacious mucous in the throat; constant desire to swallow; painful, difficult, and sometimes also spasmodic, deglutition, with danger of suffocation; inability to swallow the least liquid, which escapes through the nostrils. The pains in the throat commonly extends as far as the ears, the parotids, the sub-maxillary glands, and those of the neck; they are aggravated for the most part by empty deglutition, as well as at night, in the fresh air, and when speaking; and they are often accompanied by salivation.

Sympathetic Symptoms.

Heat, with shiverings; attack of fever at night, or in the evening; slow and hectic fever; pulse irregular, quick, strong, or weak, and trembling; copious, colliquative sweats, both day and night; ill-humor; irritability; moral dejection; moroseness and repugnance to conversation.

TO JOHN F. GRAY, M. D.

I find that my so called Review has given offence to one who is either unwilling or incompetent to deal fairly with me. I address myself to you, because the task of vindicating myself before any other than an enlightened and liberal physician would certainly be very laborious, and, in all probability, fruitless. You stated, years ago, in your paper "On the Duty of Physicians to study both Systems,"* that

"Physicians of both schools are under the strongest possible obligations to examine the rules of practice from which they habitually dissent, with an attentive and tolerant spirit, not only because such study produces greater circumspection in the care and cure of the sick, but because it promotes the progress of truth and sound conciliation.

"In the records and theoretic writings of both schools, there is certainly much error, but assuredly, also a great deal of truth, and the sooner a catholic eclecticism inspires both parties, the better for mankind at large, and for the true honor of the medical profession. It is not true that the Homœopathic method is inert, or quackery, as is gravely asserted by writers of the old school; on the other hand, it is not true that the thousand methods pursued hitherto are all totally depraved, void of good results, and to be instantly and wholly abandoned, as is affirmed by many of the new school. The adherents of both plans of cure do a great deal of positive good in society; at least, those of them do, who are well educated, conscientious, and thoroughly stored with plain common sense. *The truth, so far as practice is concerned, must therefore lie in some yet unascertained middle point between the two systems.*"

It is almost needless for me to remind you that I have instinctively followed your sound

* See Vol. 1, No. 1, of the Examiner.

advice, and that I labor under the impression that I have discovered "a middle point" where the two systems meet, not only in practice but in theory. Neither do I differ so widely from Hahnemann as is commonly supposed, for he states in the §45 of his Organon, that "Two diseases which *differ greatly* in their species, but which bear a strong resemblance in their symptoms, always mutually destroy each other;" and adds in his Spirit of the Homœopathic Doctrine, that "Without this *natural difference* between the affection arising from the disease, and that arising from the medicine, there could not possibly be any cure, but rather an exasperation of the disease." It is true that Hahnemann labors subsequently to prove that no cure can take place unless there be a certain degree of similarity between the action of the disease and that of the medicine which cures it; but this assumption is not only contradicted by his own admissions, but also by his practice and that of his followers. Thus, in the last No. of the Examiner I proved that Aconite was not Homœopathic but Antipathic to inflammation; in Jahr's Manual, Bryonia, Mercury, Pulsatilla, Sulphur and Veratrum, are advised against constipation, yet all these drugs are purgatives, and some of them drastics; Bark, Iron, Lime, Nux Vomica and Opium are recommended against diarrhœa, yet they all cause constipation; Hyoscyamus and Opium are said to be Homœopathic to sleeplessness; Angustura, Copper, Cocculus, Ignatia and Nux Vomica, all of which specifically induce convulsions, are employed with success by the Homœopathists against paralysis; finally, Hahnemann's recommendation of Aurum against melancholy is notorious, yet the remarkably joyous state of mind induced by the internal use of this drug, is particularly noticed by Riecke and Dierbach. These proofs must suffice for the present; if more are required I pledge myself to produce them by hundreds.

Again, this assumption of Hahnemann is contradicted by all the theory and practice of the old school ; it cannot be a true theory, for it is opposed to many facts and explains none. I can discover no other escape for the Homœopaths from this dilemma, than in the recognition by them of the fact that similarity includes a difference and a resemblance. If this fact be admitted by them, there is no longer any theoretical barrier between the two schools, and Homœopathy becomes a legitimate and valuable, but as yet rejected part of old school practice. In my Gleanings I have proven that there is no *practical* barrier to the adoption of the Homœopathic practice.

It has been asserted that my remarks upon the *Materia Medica Pura* are hardly worth a notice. You will agree with me that it is far easier to make such an assertion than to prove it ; to add still further to the labor which must be expended in the attempt to do so, I will quietly seize this opportunity of strengthening my positions by a quotation from Wolff's *Theses*, (see *Examiner*, Vol. 1, p. 115), where I read :

"Nor, are we ignorant of the deficiencies in the arrangement of symptoms adopted by Hahnemann. By commingling the symptoms observed by different experimenters, without noticing what doses were employed ; nor what symptoms were primarily manifested ; in what groups, or order of succession they occurred, and the slight regard paid to objective symptoms, (viz., physical and chemical signs) all tend to render it impracticable to know the organ primarily affected by a given drug, the relations of the symptoms one to another, or what is more important, the peculiar nature of the total operation of any remedy, so that it must be regarded as a difficult task to select the right remedy from the *Materia Medica Pura*."

This passage renders it evident that Hahnemann neglected, in a great measure, the aids of Anatomy, Physiology, Chemistry, Morbid Anatomy, and Pathological Chemistry, and Physical Signs in the construction of his *Materia Medica*, and that those physicians who are best acquainted with these branches of science, in short, those who know most of disease, can make the least use of this

work. The knowledge of disease is still far in advance of the study of the means of curing disease ; and this disproportion will remain until the objective side of the effects of drugs are studied with the same minuteness with which Hahnemann studied the subjective.

It has been asserted that the school which I seem to favor,* imagines it to be the duty of a physician to invent systems by stringing together empty ideas and hypothesis upon the immediate essence of life, and to confound the whole in unintelligible words and pompous observations, which make deep impressions on the minds of the ignorant. Now modern Pathology is characterized by its neglect of the ideal and its cultivation of the material ; no modern Pathologist, except Broussais, has been guilty of thrusting a system upon the world ; not one has put forth an hypothesis upon the immediate essence of life, but it is notorious that they cannot be tempted to entertain an hypothesis under any circumstances ; they never deal in pompous observations or unintelligible words, they neither make loose statements, nor advance mere opinions, but always give us an exact number, and never generalize a single step beyond their facts and figures, but on the contrary, take great pains to note and publish even a single exception to a general rule ; in short, they confine themselves strictly to the study of particular facts, and the discovery of general facts. For the life of us, we cannot discover any connection between the study of the physical and chemical signs of disease, and empty ideas and hypothesis upon the immediate essence of life ; nor between the exactitude of numbers, the simple enunciation of individual and general facts, and those "unintelligible words and pompous observations which make deep impressions on the minds of the ignorant." You must agree with me that

* I have not considered it necessary for me to avow adhesion to either school.

I was not bringing coals to Newcastle, when I urged the study of Pathological Chemistry, Morbid Anatomy, and Physical Signs, upon the Homœopathic school; and, I venture to add, that it is manifestly improper for any one to believe Hahnemann's assertions that nine-tenths of all chronic diseases arise from itch; that there is no other method of cure than the Homœopathic, &c., until they have been rigorously tested by the numerical method. In 87 cases of croup, Ware and Bretonneau found patches of lymph upon the fauces or tonsils in 85 cases; in 193 cases of consumption Louis found ulceration of the larynx 63 times, while in over 500 bodies dead of other chronic diseases he did not find a single example of laryngeal ulceration. On the other hand Hahnemann tells us that inflammation of the eyes has been cured with rose-water, pleurisy with squills, and inflammatory fever with wine, and then draws the sweeping conclusion that inflammation can only be cured by Homœopathic remedies; again, from about 150 proofs that various diseases subsided under the use of Homœopathic remedies, he boldly asserts "there is no other method of cure than the Homœopathic;" from a still smaller number of facts he infers that nine-tenths of all chronic diseases arise from itch, and although the number of the exceptions to all these inferences is legion, he takes great pains to conceal them. It is evident that some modern pathologists have expended as much labor in establishing a single diagnostic sign as Hahnemann has in building up his whole theory.

Yours respectfully,
J. C. PETERS.

DR. GRAY'S REPLY.

The closing communication of this discussion is addressed to me instead of Dr. Kirby, for reasons which I hold to be valid as respects him, and, therefore, I take the little space left in this

number to reply, or rather to state the outline of a reply to Dr. Peters.

1. I agree with Dr. Peters that it is due to the *Materia Medica* to enrich it by new trials, which shall include the objective symptoms and signs; and that without such trials our *Materia Medica* is very imperfect and insusceptible of the exactitude of application which our therapia demands.

2. The operation of the drugs quoted by Dr. Peters as proving from the mouth of Homœopathy the truth of Antipathy as a real mode of direct cure, must be shown to have been absolutely remedial in cases in which all, or at least, a majority of the symptoms were opposed to the pure effects of those drugs, before he can justly so quote them. Mercury, for example, produces constipation as a direct effect when so used as to produce yellowness, emaciation, sweating, night rheumatism, &c.; and when such symptoms and constipation are present, it is strictly Homœopathic, however, its power of purging under different circumstances may render it apparently Antipathic to constipation. The concomitant symptoms are just as much of the malady as that one from which it is named. So I might answer of all the others except aconite, which I must admit appears to make strongly against those who deny that there is any other direct cure than the Homœopathic. Like Felix I adjourn aconite to a more convenient season.

As to paralysis and convulsions, I deem them (for reasons which there is not room to give), as exceedingly similar symptoms. The "joyous" effect of aurum, must, as Hahnemann says of it, have been curative in the cases alluded to.

3. Hahnemann's psora theory is in no wise connected with the discussion of the essential question (Homœopathy).

4. Dr. Peters' "Difference" appears to me only another mode of asserting Homœopathy. I agree to it.

5. If Dr. Peters will produce a *Materia Medica* which shall include the objective side of the pathogenesis, and render the bright and glorious results of autopsy and auscultation of use in the choice of remedies, he will convert all the valuable men of both schools into one great phalanx of real physicians; he will have found that "middle point" which will justly render him immortal. I think his suggestions to this end of very great value.

6. His last two paragraphs are very unjust. Hahnemann does not recommend wine as a cure for inflammatory fever, nor squills for pleurisy, nor rose water for ophthalmia; no one knows better than the author of "Gleanings" to what end those citations were made by Hahnemann.

THE
.
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EDITED BY
A. GERALD HULL, M. D.

A certis et exploratis petendum esse præsidium. CELSUS.

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